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# Developing a nursing management degree programme to meet the needs of Irish nurse managers.

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## **Developing a nursing management degree programme to meet the needs of Irish nurse managers**

Abstract

**Background** The study is placed within the context of the Irish healthcare system, which has undergone tremendous change, at the dawn of the new millennium, in particular from the nursing management and leadership viewpoint.

**Aim of the study** The aim of this study is to explore nurses' expectations of the content and delivery of a nursing management degree programme.

**Methods** This is an on-going action research study. Data has been collected using a focus group interview, questionnaire, document analysis and a reflective diary. Data was analysed using thematic analysis and SPSS as appropriate to qualitative and quantitative data respectively. To date two action research cycles are near completion and a total sample of 117 students have taken part in the study.

**Findings** Nurses commencing the programme were unsure of their education and training needs, as they had not yet taken on board the recommendations of the Irish Commission on Nursing (Government of Ireland, 1998). The findings suggest that nurse managers may not know what they need to know in light of the many current changes taking place in the Irish health system. The introduction of personal development planning is among new strategies taking place as part of the second action research cycle. Personal

development planning can help nurse managers to reflect on their current responsibilities and plan for their future career pathways.

## **Conclusions**

The findings are presented in the context of one institution. Action research, which nests comfortably with certain management styles, has proved suitable as a tool for developing and changing this programme. The need for university teachers to focus on management development skills as well as the transmission of management theory is supported.

## **Introduction**

Educational providers of nurse management programmes are faced with the critical task of designing curricula that will address present and future health care needs of nurse managers. It is suggested that existing management courses, in the Irish setting, have not met these needs. Nevertheless, current nurse managers are expected to move confidently into their roles, within the current climate of change (Joyce, 2000a). In order to meet the requirements of consumers of care and of health care organisations, Flanagan (1998) emphasises the importance of nursing education and nursing management working in partnership. This study attempts to make these links by using an action research approach to develop a nursing management degree programme.

### *Self Reflection and Learning of Action Researcher*

This project set out in a technical orientation, with me as the main researcher realising before approaching the students that there were some problems with the content of the BSc Nursing Management programme. Carr & Kemmis (1986) identify three orientations

of action research: technical, practical and emancipatory. The technical orientation is similar to what Schon (1983) has described as technical-rational. It assumes a position in which problems are defined at the outset and solutions sought. As the educational researcher, I set out to improve the effectiveness of educational practice, co-opting the students, as co-researchers in the study. If change was to be successfully implemented it required that the students had some ownership of these developments. They were keen to become involved in the study as they hoped it would benefit them from two perspectives; firstly, in identifying any training and education gaps in the current programme; secondly, by their participation they would also appreciate first-hand the research process.

It was recognised that the students in year 1 of the programme were not sure of their education and training needs emanating from the recommendations of the Commission on Nursing (The Commission) (Government of Ireland, 1998) which was established by the Minister for Health in 1997. In relation to the management of the health services, in particular, concerns brought to the Commission related to a sense of exclusion from the strategic planning process, communication with nurses within organisations and the development of management potential within nursing. The students in the 2<sup>nd</sup> year of the programme verbalised difficulties with particular content in the programme. Some modules were viewed as being at MSc level e.g. Health Economics and there was some repetition between modules (Table 1). Students emphasised their needs for specific skills training, in for example, devising service plans and budgeting. These reflections lead me to the literature on management learning.

### *Management Learning*

As far back as 1975 Mintzberg (p.61) suggested that ‘...cognitive learning no more makes a manager than it does a swimmer. According to Fox (1997) management education, largely provided by university schools, tends to be mainly theoretical. Management development mainly provided by the Human Resources department of an organisation focuses on the practical aspects of skills development. The skills of management learning emerged in an effort to bridge the gap between management education and development. Fox (1997) suggests that although the worlds of management education and development are overlapping there is some distinct differences. In content, management development focuses on developing personal knowledge and skills (time management, assertiveness etc.) while management education focuses more on acquiring analytical and critical skills in the academic skills relevant to management (finance, research etc.). In teaching methods, management education is delivered by and large by traditional methods (lecture, tutorial, and seminar) while management development uses a much-varied range of methods. The Council for Excellence in Management and Leadership (CEML) (2002) found little evidence of innovation in management teaching practices, suggesting that universities resist shifts in teaching methods. The council recommends more research into management to improve the process.

According to Zuber-Skerritt (1992: 219) management development for the future needs to be process-oriented as opposed to merely content oriented. She suggests that

Academics are also managers (of learning, teaching, self-development, curriculum, administration, committees, budgets etc.) and facilitators of learning process rather than mere transmitters of content and subject knowledge.

According to Williams (2002) the possession of qualifications at higher levels cannot be assumed to be strongly related to skill for managers. In fact Eraut (1994: 82) would propose that much management learning is 'haphazard and semiconscious'. Zuber-Skerritt (1992) proposes that the increasing importance of responding to the fast-changing environment is the reason for this shift from content to process. General competencies and methods to acquire new knowledge and skills rather than specific knowledge and skills, per se, are required to solve completely new problems.

Likewise, McNiff (2000) believes that learning is a creative process and it should enable people to learn to do things for themselves and take responsibility for potential implications of their own practice. Managers need to find ways to ensure that individual and organisational growth will be aided by the quality of their relationships with others. Through the individual's collective learning such relationships should sustain the process of organisational change. She believes that management schools should encourage participants not to accept theory or practice that are unsuitable for their practical everyday needs. They should facilitate them to question such systems.

## **Context**

The context in which practice occurs has an impact on professional and organisational outcomes. It is important then, according to McCormack et al (2002), to make explicit the focus of this context, either as a presentation of the complexity of factors that enable

effective practice or the way in which organisational systems and structures interact with each other.

As Irish nurse managers welcomed the third millennium a number of transitions were taking place both in nursing and in nursing management. Some of these transitions include a move from a predominately nursing workforce to the introduction of non-nursing personnel, diploma to degree level education for nurses, the introduction of three grades of first line nurse managers, strengthening of nurse managers roles, and a move from transactional to transformational leadership styles. These transitions have come about following a number of documents published by the Irish Nursing Board (An Bord Altranais) and the Irish Government. In particular the Commission on Nursing (Government of Ireland, 1998) has been instrumental in these changes.

This study is taking place in a university setting where a nursing management programme has been delivered from certificate to diploma level since the early 1980s. The Bachelor of Science (BSc) in Nursing Management commenced as a two-year part-time degree programme, in the academic year 1999. I, as researcher was also the lecturer/ co-ordinator of the programme, at the commencement of this study and joined the staff in the department in 2000. As an 'insider' action researcher there are two main challenges. According to Coghlan and Casey (2001) being close to the data there is a danger of not probing as much in interviews as an outsider might. Secondly, there may be role conflicts within the organisation.



Beginning the post in the second semester of the programme brought its own difficulties. The students were dealing with a new lecturer/co-ordinator half way through year one of their programme. Gaining the trust and support of the students took time, as did getting to know each student on a one-to-one basis. There were 20 students in this first group. Having a special interest in action research I introduced the students to this approach in their research module.

### **The Study**

The aim of this study was to explore nurses' expectations of the content and delivery of a nursing management degree programme.

The objectives were:

- To explore nurses' expectations of how a nursing management programme enables them to meet their leadership and management needs in the context of their practice settings
- To explore nurses' expectations of a nursing management programme in terms of meeting their personal and professional development
- To identify any education and training gaps in the current nursing management degree programme
- To develop a programme which could address the needs identified

### *Design and sample*

An action research approach using both quantitative and qualitative data collection methods were employed. Action research has been described as

...a participatory, democratic process concerned with developing practical knowledge in the pursuit of worthwhile human purposes...It seeks to bring together action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people, and more generally the flourishing of individual persons and their communities.

(Reason & Bradbury, 2001:1)

The main benefits of action research are the improvement and understanding of practice by its practitioners, and the improvement of the situation in which the practice takes place (Zuber-Skerritt, 1992).

A purposive method of sampling was chosen as most appropriate for the study. Four groups of students have participated on the programme to date, bringing the total sample to 117. These groups come from diverse backgrounds. The majority of the students were in management posts and some of them moved into promotional posts during the programme. They worked in both rural and urban-based organisations, which vary in size and in their management structures.

Demographics of the second year participants were profiled in terms of the management course they had already completed, the title of their current position, the level of management that best described their position, and the number of years in this position. Data was collected through interviews and questionnaires. The story and outcomes of the project are outlined in Figure 1.

*Initial Groundwork – 1<sup>st</sup> Action Research Cycle*

This involved examining the content of the curriculum document in light of the changing role of the Clinical Nurse Manager (ward sister) in the recommendations of the Commission on Nursing (1998). The Commission identified education, together with a range of other issues such as greater budgetary control as needing more attention in the development of nurse managers. The motives for undertaking a management course in the Irish setting were investigated by Jennings (1996). The prime motive for attending management courses was that nurses foresaw these courses offering a route towards promotion. Howley (1997) conducted another Irish study to examine the continuing education needs of ward sisters and nurse managers relevant to the existing needs of the service and their own future development. Budgeting was identified as a top training need. Other management topics identified as necessary in management positions included legal issues, counselling and communication skills, research, time management, new technology and clinical update. In addition nurse managers identified leadership as a training necessity.

A training needs analysis of all nursing personnel working in the Eastern Health Board (EHB), the largest health board in Ireland, was carried out in 1997. Management was reported as one of the seven courses most often taken yet the majority of respondents who had completed these courses listed management subjects as required by them to improve practice (Nursing Research and Development EHB, 1997). The studies by Jennings (1996), Howley (1997), and the Nursing Research and Development EHB (1997) highlight that although nurses are taking management courses for promotional and achievement reasons, they still identify a need for more professional development in this

area. An Bord Altranais (1997) in their framework document on continuing professional education for nurses in Ireland also identified a need for appropriate management courses to be provided to meet the needs of nurses functioning at all levels of administration and of those remaining in clinical practice.

In relation to education and preparation of first line managers Duffield (1991) found that methods suggested to improve this preparation vary considerably. These include group problem solving, workshops, journal clubs and the use of leadership self-assessment tools. Davidhizar (1995) suggests that 'shadowing' a successful nurse leader is a highly valuable way to learn management skills. Topics identified as important for nursing managers in Davidhizar's (1995) study included budgeting and resource allocation, conflict resolution and the management of change. An education needs assessment conducted by Sullivan et al (1994) indicated that motivating others, managing change, developing leadership and mentoring/coaching staff were among top priorities. These findings are in keeping with a later Irish survey (Office for Health Management, 1998) exploring the managerial skills identified by those working in the healthcare sector.

The content of the modules in the BSc programmes were examined in the light of the recommendations of the Commission (Government of Ireland, 1998). It was suggested that expanding practice, accountability, clinical governance and ethics were not fairly represented in the programme, at that time (Table 1).

#### *Data Collection - Diagnosing*

Data was initially collected via a focus group interview with seven students. These students were all working in management posts. The interview was guided by the study objectives. Following analysis of the interview a questionnaire was designed and distributed to a wider sample of 40 students in their second year of the programme. Both open-ended and closed-ended questions were incorporated. The questionnaire included likert, ranking and visual analogue scales. Following questions about demographics of participants they were asked to rank, in order of importance (1 to 8) the teaching/learning approaches identified in the literature, as appropriate to a nursing management programme.

### **Results -Data Interpretation**

Data from the focus group interview and from the open-ended questions of the questionnaire was analysed by thematic analysis. This analysis included the participation of the students and met a dual purpose of involvement and in experiencing research. Themes were allowed to emerge capturing the spirit of the respondents' own words. Three main themes emerged, professional and personal development, providing an evidence-base, and communication. The following are examples of comments from participants:

‘It changes your whole way of thinking and exposes you to an amount of different situations...’ (Std.D)

‘...I feel I owe it to myself...(Std G)

‘It is really to give myself the knowledge to back up things that I am trying to change and implement in the hospital.’(Std G)

‘I want to back my practice with theory.’(Std B)

the programme ‘...will help to define our roles.’ (Std F)

‘...it gives us the language to put forward a particular point...we don’t have the language to articulate whatever we want.’ (Std D)

Student A stressed the importance of ‘...getting the language to deal with them (other professions) more confidently.’

Quantitative data from the questionnaire was analysed using SPSS statistical analysis. These results suggested that the majority of the 40 students (response rate 75%) had completed a diploma level programme in nursing management. Seventy three percent were at Clinical Nurse Manager (ward sister) level while 6% were at Director of Nursing level. In addition, 80% of the group were 0-5 years in their current position. On identifying the approaches to teaching/learning as appropriate to nursing management programmes the majority of respondents agreed that group discussions, problem-centred learning and lectures were of greatest importance. Reflective diaries were seen as having lesser importance (Table 2). These findings are in keeping with French et al (1996) who explored similarities and differences between nursing degree programmes internationally where the lecture method was the most used method. French et al (1996), in their study, also found that there appeared to be little relationship between course content and reflective learning across nursing degree courses.

Topics identified as having some importance on nursing management degree programmes were scored on a 7 point visual analogue scale. Such topics included negotiation skills,

change management, budgeting, coaching and mentoring. These findings are similar to findings in a recent evaluation of a Leading an Empowered Organisation programme in Ireland (Centre for the Development of Nursing Policy and Practice (CDNPP), 2003). Coaching and mentoring has been addressed at a theoretical level on the BSc nursing management programme. It has been recognised that there needs to be practical application of these supports. The majority of topics were deemed to be of a level of importance at 5 or greater on the scale.

A 5 point likert scale was used to assess the participants' level of agreement or disagreement with programme outcomes. The outcomes of the programme listed included: 'gives me the language to articulate my point of view with other professionals', 'gives me the practical tools to deal with situations at work', 'helps me define my role in the context of current healthcare changes', 'addresses relevant professional issues as they relate to nursing management'. Some participants disagreed with the latter statement, which is in keeping with the data from the focus group interview. The final question was an open one regarding any gaps in education and training needs of the nurse managers not addressed in the current programme. Only one student suggested that more time be spent on communication and resolving conflict. Participants in Cooper's (2003) study also identified skills for handling conflict as necessary for their roles as leaders. In addition a recent Irish study (Department of Health & Children/ Dublin City University, 2003) points to examples of conflict between nurse and managers. The need for improved communication in the health service was highlighted in the Commission on Nursing (Government of Ireland, 1998).

### *Planning Action*

Following data analysis there were proposed changes discussed with the groups of students and with the external examiner at programme team meetings. The proposed changes were accepted and it was suggested that these changes be implemented in the next academic year. An action plan for the proposed changes, setting timeframes and evaluation checks was drawn up with the participants.

### *Taking Action*

These changes were introduced, on a phased basis, at the commencement of the academic year 2001/2002. As there was a new group of students (n=40) joining the nursing management degree programme they were also introduced to these changes and became part of the action research study. The students were enthusiastic about the changes.

### *Evaluating Action*

These changes were evaluated positively via questionnaires to students. The concept of one access to diploma level year for all nursing degree programmes was viewed favourably. This diploma year for all programmes was in keeping with the concept of the curriculum principle of flexibility (Joyce, 2002b). The students then had the choice of selecting a pathway to BSc in Nursing (which primarily focuses on clinical practice), BSc in Nursing Management or BSc in Nursing Practice Development. The change was accepted as a much needed one. In order that change is managed effectively, Coughlan & McAuliffe (2003) believes that there must be a sense of commitment, which is built



through communication. This must involve hearing the responses from those working in the organisation, so that the change process may be altered in the light of that feedback. The importance of communication was explicit in following the action research approach.

Having the potential for changing practice, action research can also be ethically problematic. Williamson and Prosser (2002) suggest that, given the political nature of action research, it is very difficult to guarantee confidentiality and anonymity. Secondly informed consent is more difficult than in other research projects. As an insider researcher I tried to address these ethical issues by ensuring participant feedback or member checking. The participants got the opportunity to comment on and add to my interpretations. I, as principal researcher was also aware of adhering to the ethical principles of research throughout the study.

## **2nd Cycle – Diagnosing**

The diagnosing part of the second action research cycle involved the evaluation of the first cycle. It also took cognisance of the recommended guidelines for the future development of nursing management programmes, as outlined by the Office for Health Management (2002). It was reassuring to note that the content of the nursing management degree programme was developing in line with these recommendations. However, there are some teaching/learning strategies yet to be implemented. These include the use of action learning sets, action plans, mentoring and personal development planning. These strategies have been suggested as appropriate for the clinical setting also and greater usage of personal development planning, in particular, should help meet the needs of

nurses who want to become more empowered (Department of Health & Children/Dublin City University, 2003) My role has now changed from a co-ordinator of the nursing management programme in its totality, to co-ordinating and facilitating the nursing management and leadership module only. To date I have introduced these strategies to the students in the current academic year. The concept of action learning has been introduced.

### *Action Learning*

The concept of action learning has been promoted in the literature as a powerful tool for individual and organisational change (Margerison, 1988; Neubauer, 1995; Boulden, 2002). Reg Revans (1980) originally used action learning in his approach to management training. He focused on developing managerial skills rather than just increasing knowledge. According to Revans (1980) the learning and development of management skills are directly linked to the learner's real needs based on actual experience. Action learning is based on the concept of learning being comprised of programmed knowledge (things that people have been taught or have been learned through experience) plus questioning skills (the ability/willingness to challenge this knowledge). Revans (1980) believes that, in addition to knowledge gained over the years, managers need to constructively question themselves and those around them in order to be able to successfully adapt to the changing environment. According to the Action Learning Associates (2002:1) website there is a need to move away from the boss who 'gives the orders' towards the boss who 'helps people work things out for themselves'. To achieve this people need to have good questioning and problem solving skills and employees at

every level in the organisation must be empowered to act to solve the problems they face. The action learning set brings participants together to question, challenge and support each other. Sets are formed of people who have the same learning goals focusing on new knowledge coupled with personal learning (Pedlar, 1996). The use of action learning sets and leadership networks for future nurse managers has been proposed by Malby (1997).

### *2nd Cycle-Planning Action*

Because of the large number of students (n=156) undertaking the management/leadership module it was not feasible to use action learning sets with the group. The benefits of action learning were discussed with the students as a challenging approach, which they themselves may be able to introduce in their place of work. The use of action plans, however, was successfully introduced in the assignment for the module. Here the students were asked to plan a change initiative in their workplace. They were guided to develop action plans using the Force Field Analysis of change (Lewin, 1946). These plans have been analysed. The initiatives will be followed up to ascertain how many of them are implemented in practice. Hopefully this exercise will impact on fostering a culture of changing practice.

### *2nd Cycle-Taking Action*

I have been influenced by the evaluation of the module and by a document from the Office for Health Management (2002) on the development of nursing management programmes. In addition the literature on management learning has also been influential

in developing the focus of the management and leadership module. The changes, acted on, included more emphasis on skills training and less on management theory.

Teaching/learning strategies include more group discussion, student participation, and the introduction of an action plan as part of an assessment. Providing the students with a framework for Personal Development Planning at the beginning of the module has also been initiated.

### *2nd Cycle-Evaluating Action*

It is hoped to evaluate these new teaching/learning strategies by using questionnaires and interviews. I have recently introduced action learning into a practice-based module of the masters in nursing programme which I now co-ordinate. There are smaller numbers of students on this programme. The assignment for the module is a portfolio. This initiative is currently being evaluated.

### **Discussion and Conclusion**

The findings of this study to date suggest that the action research approach was a suitable means of developing a nursing management degree programme. This approach is a powerful tool for change and improvement at a local level. I have tried to ensure credibility of the study by engaging in multiple and repetitious action research cycles. It is hoped that the action research has moved on to the practical kind focusing on the practitioners' understanding and professional development. I have attempted to achieve this move by encouraging self-reflection on the part of the participants of the study. Ideally it is envisaged that the study will finally move to being emancipatory which will

prompt practitioners to reflect critically on their practice, bringing to the fore the norms and conflicts which may be at the core of the problems identified.

The study highlights the need for university teachers to engage in ongoing research of their programmes. Rather than being mere transmitters of knowledge we can be facilitators of the learning process (Zuber-Skerritt, 1992). Rather than instilling a culture of acceptance of theory, university teachers should encourage a critical thinking atmosphere among students, facilitating them to question systems. According to French et al (1996) although critical thinking and personal development are explicit in the aims of curricula developed for nursing degrees, this may not be achieved via content, teaching/learning methods or assessment. The introduction of personal development planning (PDP) may encourage such personal development and critical thinking and encourage the linking of education to management. Students using PDP can be encouraged to discuss their plans with their line managers at the commencement of the programme.

Limitations of the study to date include the small sample size and the research being confined to one setting. As principal researcher, I was also co-ordinator and facilitator of the programme, which could have influenced the findings. My relationship with the students was good but this may have led them to feeling compelled to take part in the study. To date the study results have suggested the need for constant updating and changing of the curriculum to meet service needs. According to recent Irish documents, (Office for Health Management 2002, Department of Health & Children/Dublin City

University, 2003) the emphasis should be on management development in the first place which can later be underpinned by theoretical principles. Although this study did not involve the other lecturers in the department as co-researchers their support was sought. I was fortunate to have had autonomy in decision-making for the change planned. According to Cohen et al (2000) action research nests comfortably within certain management styles. I believe that there is evidence of a participatory and transformational style of leading and managing in this study setting and this aided the satisfactory implementation of the change process to date.

The focus for educational providers should be to create nurse managers who can operate independently with confidence in today's health service environment. According to the Office for Health Management (2002) in developing nursing management programmes it is vital to centre on the value of people, inter-professional collaboration, team working, quality and continuous improvement. These are all characteristics that are consistent with the principles of the most recent Irish Health Strategy (Department of Health & Children 2001). The next step in the development of this management programme is to introduce inter-professional learning and collaboration. This is the way forward for management programmes and is in keeping with all recent Irish government documents. A strategy for education and development of nurse managers at all levels should be supportive in their quest to face a turbulent and uncertain future with confidence in themselves and their values.

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