

CHAPTER I

INTRODUCTION

BACKGROUND

Nurses comprise the largest group of health care providers in both the public and private sectors. The advancement in health care system in Indonesia has prompted renewed effort to ensure that the nurses have appropriate competencies in providing health services and nursing care. In response to that effort nursing education need to focus more closely on assuring the public on the quality of the nursing education, the area which be considered very important in the development of professionalism.

The development of nursing education as university based in Indonesia was started on 1985, following consensus in a National work shop on nursing manpower in 1983, which decided to develop Indonesia nursing education in tertiary level or in a university system. The first Baccalaureate Nursing education was started in University of Indonesia – Jakarta in 1985 and being embedded in Faculty of Medicine as one of their study program.

The Nursing Education system in Indonesia have been developed and changed for several time. In the fifties there were vocational level which received junior high school graduate and in 1962 start to have Diploma level in Academy of Nursing and only by 1985 Bachelor Degree level was started. In 1996 the vocational nursing education was officially terminated and right now there are two level of nursing education in Indonesia, the Diploma Nursing Education which is three year programme and the Baccalaureate Degree Nursing which is 5 (five) year program after High School. Baccalaureate Nursing (BN) degree is considered as the basic professional degree level nurses.

In Indonesia, the educational program in professional education such as medicine, pharmacist, psychologist, dentist, and nursing, consist of two phases,

knowledge development or academic phase and professional phase. The academic phase for every program is the same that is for 4 (four) years but the professional phase is not the same. The professional phase for BN education is 1 (one) year. In the professional phase student will have the opportunity to have their professional experiences or practice in the health care institution either in the hospital, public health or in the community and other field practice areas.

Until the year of 2000 there were only 7 (seven) BN Education in government university, but right now in the year of 2006 there are 85 BN educations in Indonesia. 15 out of the 85 are government university and the rest are private and in the near future there will be many more to be open. This fast movement in number of new BN education indicates that there is high need to have qualified nurses in Indonesia. This progress should be safeguard by consistent monitoring system, especially to maintain the quality and to show the accountability to the public. From my observation unfortunately this monitoring system is rather weak therefore, clear rule and regulation based on clear nursing education quality indicators badly needed.

The existing guideline being used in implementation BN education is a very broad guideline for Higher Education program, set by the Ministry of Education. Although this guide line consist of the important components of higher education, but still it is not able to guide the implementation of BN in many specific and important aspect appropriately. For example related to educational background of the faculty members, the ratio and the numbers of the student in the class or group to attend a certain subject or activities, the teaching resources especially in the clinical teaching etc.

As a profession, nursing has certain specificity, related to the specific body of knowledge and the educational processes, which will not be the same with other educational program. Shavelson et al (1989) and O'Connor et.al (1999) stated that a specific guideline will be able to safeguard any development or implementation of the institution. This is specially important for Indonesia condition since there are such rapid increasing number of BN education and many people interested in open the

BSN education although they have limited understanding how to manage the program. Without strong and a clear guideline such as quality indicators, people might jeopardize the implementation of nursing education unintentionally.

Another document used in running BN education in Indonesia is a National core curriculum. This document elaborated the general objective of BN education, the structure program and the course description. Although this is special document for BN education but still do not provide information in details.

According to the Higher Education Regulation, every Higher Education institution should use the National Curriculum provided by the Ministry of Education specific to the study program offered. National Curriculum consist only 60% of the whole curriculum and before to be implemented by certain institution , it should be completed by that institution by adding some subjects or credits which should specially design base on the institutional philosophy, value, vision and mission. A quality indicator could also be use as a guide line for any educational institution to develop the institutional curriculum.

From the office of Indonesian Nurses Association could be identified that there are 36 % nursing education institution could not accredited by the national accreditation board (INA, 2006) This data show that certain action and means should be provided to be consider by BN institution.

The existing graduate of BN education is varying on their quality and some could not perform as expected. Center for health manpower division in Ministry of health several time conducted a screening test in recruitment new staff nurses found out that the passing level was low, only around 33 %. This condition may be related to the condition of BN education which most of them have very limited resources and limited qualified staff compare with the numbers of student they have (INA, 2006)

Through observation to several BN program, it could be conclude that there are many variety of BN condition in Indonesia in term the man power, facilities, and process, etc. Some institution for example only have one or two BN and the others are not qualified nurses or have staff with educational background which not related to

any subject thought in BN program. In general rule (MOE, 2000) mention that the educational background of academic staff should at least one level higher than the level of the education program thought. In this case, many BN institutions are also not following the MOE regulation.

Researcher several time discuss with the representative of Indonesian Nurses Association, BN Education Association and staff of Directorate of Nursing-Minister of Health. This group identified that they are also not satisfy with the existing quality of BN Education and the graduate. Nevertheless they are expecting so much to be able to recruit BN in their program especially to fulfill the nursing manpower in the health services. They also expressed that this condition merely because some management of the BN do not have precise idea or information nor guide line to be followed in implementing the BN education program. The practice of supervision and monitoring system to the BN institution also rather weak.

In Indonesia there is accreditation system organized by Board of Higher Education Accreditation, but as mention earlier it is based on very general higher educational components which not suitable and precise enough to assess the quality of BN as a professional education in specific. More over the implementation of the accreditation system is not strong enough and some institutions do not observed by system appropriately.

On May 2006 there was Nursing Education work shop which brought up the existing nursing education condition in Indonesia. These workshops conclude that Indonesian nurses especially the nurse educators and nurses association need to conduct any quality improvement program in relation to the implementation of BN in Indonesia (AINEC, 2006).

In answering to that proposed program and to overcome with all the existing condition of BN mention earlier, one possible way to start the program is by developing the quality indicators of BN. This is in line with what being proposed by several authors such as Ogawa and Collum (1998); Camilly and Firestone (1999) and others who have reviewed the nature and purpose of indicators in education, which is

mainly in evaluation, description, monitoring, value judgments, policy relevance, diagnosing problems and accountability.

Related to the important of accountability by providing quality indicators, Campbell (2002) specifically discuss about measurement as an important part in improvement and help to promote change. Specific measure may, for example, allow good performance to be rewarded in a fair way and facilitate accountability. This is the main reason why developing and applying measure of quality is very important, and quality indicators will be the proper answer.

Campbell statement was suitable to the BN condition in Indonesia. Without any specific measurement such as quality indicators or specific measurement specially developed base on that quality indicator, it is difficult to assess and to judge the quality of any BN institution. This will difficult also to provide any assistance or improvement program since there will no precise data regarding the BN condition. This also inline to what proposed by Shavelson et al. (1989) that a good education indicator is expected to provide accurate and precise information to illuminate the condition of education and contribute to its improvement. Indicators are expected to assist policymakers as they formulate educational goals and translate those goals into appropriate actions.

The term quality indicator gives an impression of something tentative, rather than precise or exact measures that are used to guide decision about quality. Quin (1995) state that quality indicator express relationships between input and output via intermediate throughput or process. Cave, Hanney and Kogan (1991) define quality indicator in Higher Education as an authoritative measure, usually in quantitative form, of an attribute of a Higher Education institution.

According to Lim (2001), quality is something, which fits the purpose and Higher Education Council of Australia (2001) which mentions that quality is a relative concept, meaningful only in relation to specific perspective and set within the context of a particular purpose, particular area or places, such as a country or certain state of development. Education is a service; therefore service quality concept should

be applied in educational system. In service quality there are many important subjective elements, include the employee and the customer, time spent, standard for service, processes and the output of the service.

In relation to the above statement, the quality indicator is an important aspect to be identified in any development program, especially in the area of higher education such as BN Education in Indonesia. As mention earlier the progress of the numbers of BN education are very fast in latest year. Any effort should be done in safeguarding this development as early as possible, to prevent any possible problem regarding BN education. One of the efforts is by providing the quality indicator. Quality indicator of nursing education from other country or internationally could be found and appear in any document such as books, booklet or stated specifically in the document of certain nursing education institution. Since quality is a relative concept therefore in different places or country such as Indonesia, those indicators from other part or country might need to be adjusted or even the nursing education in Indonesia should identity and develops the specific one, which appropriate for Indonesian situation.

Professional association of various kinds has an important part to play in higher education, being to ensure that standard is upheld in their areas of interest. They have the right, through their accreditation procedures, to issue "license to practice" to those who show that they have reached the standard required. From the point of view of quality assurance, however, their perspective may differ from that of a state. The professional association primarily concerned to uphold quality and standards in the relevant discipline. (Yorke M, 1999). This statement show that nursing group should do specific effort to take part in the quality management related to nursing such as in education by providing any document needed such as quality indicators.

Many authors found trough their studies the important of developing and applying quality indicator in quality improvement programme such as Lindsay (2002). Use of a quality indicator was also succeeded in supporting to monitor

practice and to realize change of the quality of organization including staff behaviour (Hickey, 2004).

Richards (1992) stated that a National indicator must represent, at least roughly, the important components of the national educational system. Referring what have stated earlier that quality is something which fits the purpose (Lim, 2001), the quality indicators of BS nursing education in Indonesia which going to be a National Indicator should reflect the Indonesia higher education system in general. Moreover, it should be accepted not only by the nurses group but also by the authority in Higher Education such as the Directorate General for Higher Education and The National Accreditation Body for Higher Education - in Indonesia.

Another aspect will be considered in the development of quality indicators is the applicability of the BN quality indicator to be deployed in any BN Education institution (Campbell, 2002). Therefore in this study the applicability of these quality indicators in implementation of BN program will also be identified.

Other (Dickson and Linn, 1991; Blank, 1993; Sorensen, 1998) suggest that indicators can be developed and tested through research on inter-organization, cooperation and collaboration. Underlying such suggested processes is the assumption that divergent education stakeholders can agree on what is it that can and should be measured and used as an indicator. A further assumption about the process of establishing education indicators is that there are "experts" who possess the knowledge base to clearly identify the constructs that make up an education system.

This study is based on the assumption that as an educational system, the quality of the graduate is very much depend on the quality of each input and process element. Therefore the quality indicators going to be developed will consist of each element of BN education system which is input, process, output, and outcome of BN education. A clear quality indicator will direct the BN institution to identify and prepare good quality educational system in their pertinent institution. The BN quality indicator in the future will be one important reference in any development of nursing especially in the area of nursing education in Indonesia, in curriculum development,

in accreditation, and in quality assurance programme. In accreditation this quality indicator could be used as base line element in developing the instrument for the assessment stage of the accreditation system of BN education in Indonesia.

STUDY PURPOSE

1. To develop the quality indicators of BN education in Indonesia
2. To examine the applicability of BN quality indicator in BN education in Indonesia

RESEARCH QUESTION

1. What should be the quality indicator of BN education in Indonesia?
2. Will the quality indicators applicable in BN education in Indonesia?

DEFINITION OF VARIABLE

1. Quality indicators of BN education is a measurable and explicit good characteristics of each element and sub-element of BN education system
2. Applicability is the existing condition or evidence of consensus quality indicators of BN education, appear in any document or implementation in BN education.