

Review of Nursing Education and Administration in Usman Danfodiyo University Teaching Hospital, Sokoto –Nigeria

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Abstract

This study was carried out in order to review nursing education and its administration in Usmanu Danfodiyo University Teaching Hospital, Sokoto, Nigeria. The aim is to determine how nurses view the ever expected shift from hospital based nursing training to University nursing education. The transformation and the overall outcome of this change on the health sector and the clients. The research will be of great assistance to all cadres of nurses who wish to advance their career to the highest grade. A random sampling technique was employed in selecting respondents. A total number of 200 questionnaires were distributed and 191 were returned after filling by respondents. Based on educational level, 85% are diploma holders, while 15% (30) respondents are BNS holders. fig.4.1 shows that 95% are fully aware of university education. About 65% of respondents also argued that nurses could be good administrators. Based on the above findings, it was recommended that nurses should be encouraged to improve on their education so as to be able to face challenges facing the health sectors in the 21st century. Such challenges include advancement in medicine and nursing giving room to tele nursing and e-conferencing.

Introduction

Nurse means “to care” or “nourish” the term nurse suggests attendance and service, having its antonym as “neglect”. The meaning of a nurse is a person formally educated in the care of the sick or infirm, especially a registered nurse.

Nursing begun as the desire to keep people healthy and provide comfort, care and assurance to the sick. Societal changing needs have also influenced the general goals of nursing in the present global world. As history will have it, nursing and medicine have been interrelated. During the Era of Hippocrates, medicine was practiced without nursing and during the middle ages, nursing was not named then as nursing. As history will have it, men and women have held the role of a nurse.

The nurse should be an independent practitioner and she is able to make independent judgments. It is true, that, now the role of nurses as providers of primary health care as those who diagnosis and treat, when a doctor is not available.

It is rightly said that the functions of the nurses as initiators of care are in fourfold; to sustain health, to prevent sickness, to restore health and to eliminate suffering. The need for nursing is universal; inherent in

nursing is respect for life, dignity and rights of man.

1.1. Background of the study

According to the nursing and midwifery council of Nigeria (2005), detailed history of a profession that combines scientific principles, technical skills relayed, but documents revealed that caring profession came into awareness since 1854. In the very olden days, nursing was mainly practiced in a family setting, with mother caring for her children and nurturing care tremendously increased for acquaintances. About 1880, status of nursing greatly improved many females and religious individuals became involved in patient care. Then many school of nursing sprang up in Europe. The very first established in 1836 by Parker. The order flourished, in Kevesworth Germany through the influence of Florence Nightingale. The first movement for the recognition and registration of the nurse occurred in

1882. Mary E. Mohny was the first African American graduate nurses, that promoted integration and better working conditions for black clients and healthcare workers.

In Nigeria, caring was initiated towards the wounded came through the British colonial master. Services and care were initiated towards the wounded soldiers at the “forte”. The first nursing home in Nigeria was established in Jericho, Ibadan by the British government.

Later on, missionary homes, dispensaries and a host of others started rendering nursing trainings and then started the training of nurses in Nigeria. Problems associated with this kind of training were that no real formal education, also language was today in Nigeria, institutions offering nursing education are inadequate, the schools of nursing offering three years nursing programmes with vast clinical training and practicum and the university programme offering five years bachelors of Nursing Science programme (BNSC). Also we have different institutions offering Post Basic Nursing Education Programme, with duration varying from one full calendar year to two years. Certificate being awarded is Diploma in such area of specialization like: Diploma in Pediatric Nursing, Accident and Emergency caring, Tutorial Nursing, otorhinolaryngology (ENT).

Each year, registration and enrollment in most of these courses is large, but a little percentage is admissible, this phenomenon has led to shortages in our hospitals. As at now, the crave ought to have ensured that standard is raised to meet the present challenges. More emphasis should be geared towards infrastructural development, teaching instruments to give room for the breakthrough. By 2020, all registered nurses in Nigeria ought to have upgraded themselves to meet the challenges in the health sector. Is this achievable? Of course the answer is no, institutions are restricted in the number of students they admit per session, hospitals cannot release all their nurses at a time in pursuant of degree, if they do, who will then care for the teaming patients in the ward?. Just as it's a worthwhile venture, more time should be given for this kind of transformation in other to carry every along. Infrastructure development, teaching and learning aids. Human and materials resources should be richly enhanced to give room for the breakthrough. “Health for all” by 2020.

It is only when more personnel are developed that this can be reality. Opportunity should be given to students who want to choose career in nursing and allied health programmes, by expanding the number of students being admitted into various health care institutions provided they meet the criteria's for admission and they are qualified.

On the other hand, administration in nursing has its challenges as well. Many organizations and institutions had previously side-lined nurses as part of the decision makers. This is due to the fact that, nurses were then regarded as non graduates. This has affected the profession then in Nigeria. With the state of things presently and the world being a global village, many courses are unveiling and e-learning, e-conferences, Skye chatting and webcam facilities have improved not only nursing education, but also medical breakthrough as well.

Administration in nursing has been faced with numerous shortcomings in Nigeria today. The word “administer” is derived from the Latin “ad” ministries” means to care for or look people to manage” affairs. (BT Bassavan Thappa).

Administration encompasses every human Endeavour, be it private public, military, small or large scale, which is practiced all over. Since administration perimeters all planned human activities, hence, it is at the centre of all human affairs. The main guiding principles of administration are policy formulation and implementation for the attainment in an optimum manner of stated end in the shape of service or products.

(L.D. white) define administration as the direction, coordination and control of many persons to achieve some purposes or objective.

Nature of Administration

The processes to be considered in administration is intellectual social dynamic and creative and as well continuous features of administration is as follows:

- It is universal, since irrespective of nature and objectives of the organization, all basic elements of administration such as planning, organizing, staffing, directing,

- coordinating, reporting, budgeting all apply for its effective achievement of goals.
- It is intangible; since administration is visualized as abstract. It cannot be transferrable to anywhere.
- It is continuous and ongoing process.
- Its goal oriented, since administration is always struggling to achieve the laid down goals and objectives of the organization.

The nature of administration cooperated with two broad views, i.e. integral and managerial. Integral Views: have to count the work of all fellows, ranging from very minute level to the highest degree for example group “D” official to the top level officials work in the setup. For e.g. taking care of clients requires and needs effort of whole health/medical team including Nurses, Doctors and Para medicals and group “D” officials.

Management positions: Regard the work of only those persons engaged in performing managerial functions in an enterprise/institutional organization as constituting administration. The activities concerning top managerial units, control and coordinate all those logistics undertaken in the institution/enterprise, the hospitals and health care institution. The acceptance of the integral view makes us count the entire personnel of an organization as in administrator, whereas managerial view holds that administration is the organization and use of men and material in the pursuant of a given objective.

Professor Luther Gullick (1937) summed up certain principles or elements in the word “POSDCORR” this acronym/pneumonic stands for:

- ‘P’ - Stand for Planning
- ‘O’ - for Organizing
- ‘S’ - for staffing
- ‘D’ - stands for Directing
- ‘CO’ - stands for Coordinating
- ‘R’ - Stands for Reporting
- ‘B’ - Stands for Budgeting

1.2. Statement of the research problems

Education has led to more awareness in all ramifications of human endeavors. And vast opportunities have been created with more advancement in knowledge pursuit. Nurses occupy sensitive and even more landmark positions in the multidisciplinary health care team. Major and quality in-puts are being made by nurses in a bid to promote and maintain patient’s optimum wellness.

The above can mainly be achieved through a reform in nursing education. And this transition is all over the country (Nigeria) moving nursing education from hospital to university base. Majority of the nurses have the opinion that hospital trained nurses are more practical oriented than the university trained nurses. A lot of criticisms also result regarding the generic programmes in nursing education, emphasizing that the generic graduates are deficient in clinical practice (Erinosho, 2001).

The question now is that what are the views of nurses about this ongoing transition in basic nursing education from hospital to university based nursing education in Nigeria?

The study is designed to review nursing administration in Nigeria and also establish nurse’s opinion or views concerning the ongoing transition of basic nursing education from hospital environment to a university atmosphere.

1.3. Significance of the study

This is to emphasize on the transition of nursing education from hospital to university base. It is a positive innovation, yet a delicate one. More investigations needed to be carried out before fully subscribing into it. Most advanced countries that had keyed into it have both the human and material resources rightly in place.

The study is to seek the perception of nurses on this transition and as well to throw more light on the merit of the transition. This will help those at the level of decision making to

know nurses anticipated problem from the transition and enhance ways of articulating these problems.

1.4. Research objectives

1. To assess the benefits of university education among nurses in UDUTH.
2. To establish nurses opinion about move of basic nursing education, formal to university.
3. To determine the pattern of nursing administration in UDUTH, Sokoto.
4. To determine the effectiveness of nursing administration in UDUTH, Sokoto.

1.5. Research question

- (1) What are the benefits of university based education among nurses in UDUTH?
- (2) What are nurses opinions about moving from hospital based education to university level?
- (3) What is the pattern of nursing administration in UDUTH, Sokoto?
- (4) How effectiveness is nursing administration in UDUTH, Sokoto?

1.6. Scope and limitation of the study

The studies include clinical nurses in teaching hospitals (Usman Danfodiyo University Teaching Hospital, Sokoto State). The research intends to study the perception of nurses towards nursing administration and moving nursing from clinical to university based education.

1.7. Operational definition of terms

- **Administration:** Direction, coordination and control of persons to achieve some objective.
- **Code of Ethics:** Is the standard of conduct, guiding a profession.
- **Education:** Is the process of receiving or giving systematic instruction, especially at a school or university.
- **Hospital Based Nursing Education:** This is the nursing education offered in hospital setting.
- **Higher Nursing Education:** This symbolically refers to nursing education programme which is beyond the level of a nurse generalist (Okonie, 2004).
- **Nursing Education:** Encompasses theoretical and practical training provided to nurses with the purpose to prepare them through their professional career.
- **Nursing:** This is caring for an individual, sick or well in the performances of theory activities leading to health or its recovery (or a peaceful death) work which he/she may have performed unaided is gotten the necessary strength, ability or power.
- **Review:** To look over, study or examine again.

Literature review

Nightingale invented a better and more improved ways of carrying out nursing care which resulted infection control and tremendous reduction in death rate in Scutain (Janice, R.E et al, 1984). After recognizing education as very crucial, she founded the initial formal learning institution in St. Thomas Hospital with prescribed curriculum.

The modernized nursing education today in Nigeria has received lots of attention in some major areas. Owners, operators or proprietors of nursing colleges have been encouraged to assimilate such institutions into federal state or private universities.

According to (Mub, 2006) the expected change is expected to be gradual. Entry requirement for universities which schools will assimilate into, should be 5 credits, as endorsed by the nursing and midwifery council (In English Language, Mathematics, Chemistry, Physics, Biology).

The curriculum also have been reviewed and adopted to cover more grounds. Five years for programmes of generic studies in the university, with one year mandatory internship after

graduation. The new curriculum is said to have been adopted by some universities. Mobe (2006), Identified the main purpose of nursing education transition from hospital to university based:

- The health system will more or less be strengthened and better health care delivery strategies incorporated to the system.
- The non inclusion of nurses in strategic areas in the health care industry due to their low educational background which will be highly taken care of through the transition from hospital to university.
- The unpalatable image carved for nursing profession as a result of poor human relations by the nurses.
- Defective nursing services in the light of people who are aware of their rights. The transition will greatly assist nurses to face the numerous challenges of these people.

(www.nanm.com) (www.icn.ch) states rationale for improving education. University based nursing education will bring nursing to the highest level of professionalism. Furthermore, this advancement will bring about nurses involvement in health policy formation, strategic planning and implementation. This is due to the fact that nursing education is the grass root of nursing practice a more improved educational standard in nursing will yield better quality care to client and other consumers of nursing services

In the 1960's, the American Nurses Association (ANA) looked critically with concern at nursing education, delivery of nursing care. In the light if the Gideon et al (1960) looked into a study on the nurses perspective towards Baccalaureat degree programme. The study was conducted with 250 nurses who were randomly selected at five differed hospital. In the USA the research was based on sorting the opinion of nurses studied 210 nurses were of the level of Baccalaureat degree.

In another study conducted by Frances Kan et al (1990) in Hong Kong on health care reform, this has brought about a dramatic change to the nursing discipline. The study which aimed at exploring the transformation of nursing in a regional hospital in Hong-Kong during this era of innovation reveals that nursing restructuring work, its associated dynamic and resulting impacts upon the nursing profession were examined.

Nursing profession was examined methodologically, triangulation approach to data collection encompassing, interviews, participant documents were reviewed and observations were made. The findings gotten in the study suggest that the majority of nurses working in the case study hospital continued to be subject to medical dominance and are under management control. The emphasis on cost effective care has however, fostered qualified nurses to claim more ownership of their professional judgment and autonomy. The health reform confirmed the status of two newly established groups of nurses specialist and nurses manager.

Further study conducted by Dr. Jaime in 1998, on the view of nurses towards Ph.D in nursing education in Philippines, the study revealed that such nurses with Ph.D level, provided will be addressed as "Doctor" in the clinical areas. It was confirmed that in the above studies that the Philippines nurses want Ph.D in nursed for aesthetic reason not for upgrading the nursing care standard.

2.1. Nursing administration and nurse manager

A nurses administrator is always an executive position usually with a degree, master with or without Ph.D usually reports to the Chief Executive Officer. Always does more meetings than being seen with patients. Nursing administrator also referred to as Director of nursing in which all other nursing units or departments are under his or her control. In Nigeria, the nurses administrator is referred to as the Assistant Director of Nursing services (ADNS), for federal institutions or teaching hospitals. For the state owned hospitals, they are referred to as Deputy Director of nursing services (DDNS). These are the main nurse administrators, presently only one officer exist for positions like this in Nigeria.

The nurses manager on the other hand, chief nursing officer etc. The nurse manager is more with the patient, where he/she coordinates and supervises other nursing cadres in the

way nursing care is rendered to clients. Several of nursing managers exists in various units and gives report directly to the nurses administrators.

The Assistant Chief nursing officer (Level 12) directly manages the unit under the CNO and give report to the CNO. Principal and the Senior Nursing Officers are both (level 10 and level 09) respectively who are directly involve in patient care and at times takes over unit administration as suitable to the unit the nursing officer I and II are newly registered nurses with few years of experience.

Research methodology

This chapter discusses to the design and methodology adopted for the study.

3.1. Research design

This is a survey type of research, trying to find out how knowledgeable nurses are about the crave for upgrading nursing and its administration in Sokoto.

3.2. Research setting

This study was carried out in Usmanu Danfodiyo University Teaching Hospital UDUTH, Sokoto. The nursing department/unit. About 10% have attained graduate level certification. Majority are diploma holders.

3.3. Target population

The target population of this study consists of 150 staff nurses and midwives, who work with the Usmanu Danfodiyo University Teaching Hospital Sokoto at different of the hospital.

3.4. Sampling techniques

The researcher choose four hundred registered nurses nursing working with the teaching hospital (UDUTH) This figure was chosen from the target population of 500 (five hundred) simple random sampling technique were employed.

3.5. Instrument for data collection

The used instruments for date collection were both opened and closed ended questionnaire. It is divided into three (5) sections about 190 were retrieved from the respondents.

3.6. Validity reliability of the instrument

The knowledge of previous studies undergone by the researcher were used in drawing and making the questionnaires.

3.7. Method of date analysis

The collected information were analysed using frequency table, bar chart and pie chart.

3.8. Ethical consideration

The permission to conduct this research was gotten from the participants after a thorough explanation, prior to distributing the questionnaires to them. Their privacy were ensured throughout hence, no name or identification were requested from them. Religious and cultural background were also maintained in full confidentiality.

Sample size calculation

$$n = \frac{N}{1 + N(\Sigma^2)}$$

n = Sample Size

N = Population

Σ = merging of area = 0.05

$$\frac{500}{1 + 500(0.05)^2} = \frac{500}{1.2525} = 399$$

Target population = 500

Data presentation and analysis

4.1. Introduction

This chapter is concerned with the analysis of data obtained from the administered questionnaires. The analysis is based on the response of 190 respondents that successfully completed and returned their questionnaires to the researcher.

The result are as follows:

4.2. Data analysis

Section A: Distribution of respondents based on age

Table 4.1.

Age of respondents	Frequency	Percentage (%)
20-25	20	10%
26-30	50	25%
31-35	40	20%
36 and above	90	45%
Total	200	100%

According to table 1 above has shown that (20) respondents *i.e.* about 10% falls between the age bracket of (20-25). 25% falls between (2630) age bracket about 20% (40) respondents falls between (31-35) and the highest respondents falls above 36 years of age 90 respondents (45%).

Table 4.2: Distribution of respondents based on tribe

Tribe	Frequency	Percentage (%)
Hausa	90	45%
Igbo	50	25%
Yoruba	40	20%
Fulani	20	10%
Total	200	100%

The above table shows that (90) respondents about 45% are Hausa, (50) respondents *i.e.* 25% are Igbo, while (40) respondents about 20% are Yoruba and finally, only 10% of the respondents are Fulani tribe (in Nigeria).

Table 4.3.: Distribution of respondents based on marital status

Marital Status	Frequency	Percentage (%)
Married	140	70%
Single	30	15%
Divorced	10	5%
Window	20	10%

Total	200	100%
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According to table 4.3, (140) respondents *i.e.* 70% are married, while (30) respondents 15% are single, about 5% are divorced and about 70 respondents *i.e.* 10% are widowed.

Table 4.4: Distribution of respondents based on religion

Religion	Frequency	Percentage (%)
Christianity	90	45%
Islamic	80	40%
Traditional	30	1%
Others	NIL	0%
Total	200	100%

According to table 4.4. 45% (90) respondents are Christians, while about (80) respondents *i.e.* 40% are Muslims, about 30 respondents are of traditional faith (15%).

Table 4.5: Distribution of respondents based on rank

Rank	Frequency	Percentage (%)
NO	90	45%
SNO	20	40%
PNO	20	1%
ACNO	20	0%
CNO	50	
Total	200	100%

According to table 4.5., 45% of the respondents are nursing officers *i.e.* Nursing Officers, while SNOs, PNO and ACNO had 10% respondents each, *i.e.* about 20 respondents each. About 50 respondents *i.e.* 25% are Chief Nursing Officers (CNO).

Table 4.6: Distribution of respondents based on level of education

Rank	Frequency	Percentage (%)
Diploma	170	85%
BNS	30	15%
MSc	-	-
Ph.D	-	-
Total	200	100%

According to the table 4.6, 85% obtained diploma certificate, while only 30% of the respondents BNSC. No respondents has MSc and PhD.

SECTION B: Benefits of University Based Nursing Education

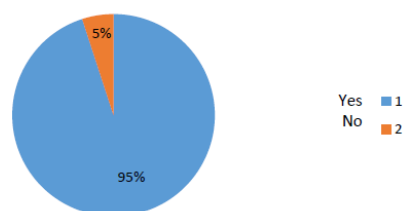


Figure 4.1: Distribution of respondents based on awareness of university education.

According to the pie chart above, 95% of the respondents admitted that they are aware of university education, while only 5% said they are nit aware.

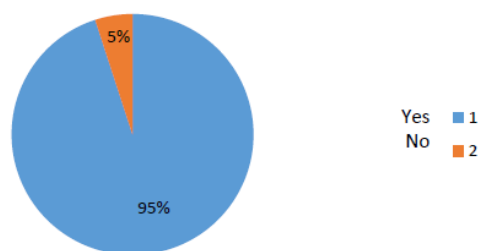


Figure 4.2: Distribution of respondents based on the importance of obtaining university education.

The chart above shows that 95% of respondents admitted that obtaining a university degree is of high importance, while only about 5%.

Table 4.7: Distribution of respondents that answered yes to question

Variable	Frequency	Percentage (%)
It is a universal form of education	50	25%
It modifies ones morally and replenish knowledge	130	65%
It brings about self fulfillment	20	10%
Total	200	100%

According to table 4.9, 25% of the respondents admitted that it is a universal form of education, about 65% admitted that it improves ones morals and replenishes existing knowledge while only 10% agrees that it brings about self fulfillment.

Table 4.8: Distribution of respondents based on the fact that university education is provided with enough practical experience.

Variable	Frequency	Percentage (%)
Yes	130	65%
No	20	10%
Not Sure	50	25%
Total	200	100%

According to the table 4.10, 65% of respondents believe that university education is accompanied with sound practical knowledge, only 10% disagree and about 25% are not sure it has.

SECTION C: Nurses Opinion about shifting from hospital based nursing training to university level

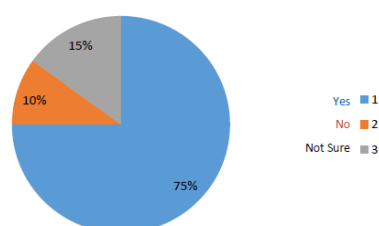


Figure 4.3: Distribution of respondents based on the importance of obtaining university education.

The pie chart above shows that 75% which is the majority, believe that the hospital based shift from hospital based to university base is a welcoming development, while only 10% disagree with the shift. About 15% are not sure of the shift.

Table 4.9: Distribution of respondents based on upon question (Figure 4.3) being Yes as a choice.

Variable	Frequency	Percentage (%)
Because all other field of studies have upgraded to	60	30%

university level		
It enhances ones behaviour morally and enriches ones knowledge.	60	30%
It develops individual's critical thinking and problem solving faculty.	80	40%
It makes no difference in clinical nursing practice	00	00%
Total	200	100%

According to the above table, 30% believed that they should upgrade since other fields are upgrading. 30% also believe that it enriches one knowledge. 80% believes that it will enhance individual critical thinking faculty. No one believes that it makes no difference in clinical practice.

Table 4.10: Distribution of respondents who answer positively to question (12) and reasons why the suggestion was made.

Variable	Frequency	Percentage (%)
To improve one's skills of learning and pave way for career advancement	170	85%
Just to change the RN nomenclature	30	15%
Total	200	100%

Table 4.10 shows that 85% suggested skills improvement will pave way for career advancement while 15% (30) respondents believe that to change the RN nomenclature is only what they desired as reason for upgrading oneself.

SECTION D Pattern of Nursing Administration in UDUTH

Table 4.11: Distribution of respondents based on the desired director in an ideal teaching hospital.

Variable	Frequency	Percentage (%)
1	80	40%
2	60	30%
4	10	5%
6+	10	25%
Total	200	100%

Table 4.11 shows that majority of the respondents 40% opted for one director of nursing in a teaching hospital, 30 chose two directors. Only about 5% went for four director and about 25% went for 6 and above directors.

Table 4.12: Respondents view on the ideal qualifications for an Assistant Director of Nursing.

Variable	Frequency	Percentage (%)
Diploma	80	40%
BSC	60	30%
MSC	10	5%
PhD	10	25%
Total	200	100%

According to table 4.12, no respondent chose Diploma as the ideal qualification for nurses leaders, about 40% choose B.sc as the best qualification, same percentage 40% choose Msc and only 20% preferred PhD as the ideal qualification for nurses who wants to lead.

Table 4.13: Respondents view on the ideal qualifications for an Assistant Director of Nursing.

Variable	Frequency	Percentage (%)
5 years	20	10%

10 years	50	25%
15 years	60	30%
20 + years	70	35%
Total	200	100%

According to the above table, 10% said 5 years working experience is desirable for a nurse leader, 25% said 10 years is better. 30% admitted that 15 years is desirable and then 35% (70) respondents took the lead, that more years of 20% should be considered for nurses leaders.

Table 4.14: Distribution of respondents based on the suitability of nurses consultants as holders of administrative positions in hospital settings

Variable	Frequency	Percentage (%)
Mostly likely	90	45%
Good enough	110	65%
Not good enough	NIL	0%
Total	200	100%

According to the above table, 45% of the respondents admitted that nurse consultants are most likely to be good administrators, while 65% confessed that they are good enough to be administrators no respondent confirm that they are not good enough.

SECTION E:

Effectiveness of nursing administration in UDUTH

Table 4.15: Respondents view on effectiveness of nursing administration in their domain

Variable	Frequency	Percentage (%)
Excellent	20	10%
Good	130	65%
Fair	50	25%
Poor	-	0%
Total	200	100%

Table 4.14 indicates that 10% confirmed 10% confirmed that nursing administration is excellent in UDUTH, about 65% the highest respondents say administration in UDUTH is good, only 25% admitted it is fair and no single respondent says it is poor.

Table 4.16: Respondents who choose poor, giving possible ways on how to improve nursing administration.

Variable	Frequency	Percentage (%)
Provision regular seminars and workshop	20	10%
Encouraging conventional university programme	180	65%
	-	0%
Total	200	100%

The above table shows that 90% prefers conventional university programme as a good platform for improving administrative knowledge while only 10% suggested seminars and workshops as way.

Discussion of findings

5.0. Introduction

This chapter consists of discussion of findings. This study identified nursing education and administration in Usmanu Danfodiyo University Teaching Hospital. A total number of two hundred (200) nurses were randomly selected and questionnaires filled as indicated below:

5.1. Discussion of findings

Based on age, 45% of the respondents were 36 years and above, resulting to 90 responding

being 36 years and over; followed by age bracket of (26-30) which had about 25% of the total population studied. 70% of total respondents who engaged in the study were married. Based on ranking, 45% of the total respondents are Nursing Officers at Junior Cadre level, followed by 25% which were CNO. Pertaining to the educational level of the respondents 85% of the selected nurses were diploma/general nursing certificates, while only 30% are graduate nurses BNSc. According to the findings, nearly all the selected nurses *i.e.* about 95% confirmed of being aware of Baccalareate form of education *i.e.* university education.

Also 95% of the studied population emphasized that obtaining university education as nurses is a good development; this is in line with the studies carried out by Gideon et al (1960), in which 210 nurses out of 250 that were studied had some view that nursing education should be geared towards the level of degree programme.

In another vein 65% of the respondents also admitted that this form of education (university education for nurses will replenish ones' knowledge and improves ones thinks critical thinking faculty). This is also in accordance with the studied that was carried out in (1990) by Frances Kam et a, that states nurses need to be further educated in specialist practice and clinical management so as to maximize the contribution of nursing in health care delivery.

The above also cancelled with the 85% of the respondents that states that skills improvement will pave way for career advancement. According to the results obtained on the required qualification for an assistant director of nursing, 40% of respondents choose BSN, Some percentage also took after MSc in nursing, these were the highest respondents, while non desired a diploma holder to take the lead in nursing career.

In this research studies, about 65% of the respondent, which is the highest confirmed that nurses consultants are good enough to manage the administration in hospital.

5.2. Recommendation

This capstone study demonstrated that majority of the staff nurses working in the Usmanu Danfodiyo Teaching Hospital (UDUTH) Sokoto, Nigeria welcome this new development of shifting from hospital based nursing educational training to University based training. Many feel that apart from developing one's critical thinking level, the healthcare industry will be better equipped with graduate nurses than Diploma holders. This goes in line with the research work that was said to has been conducted in some hospitals in the United Kingdom where the total numbers of death recorded when graduate nurses treated and handed patients were for less, when non graduate nurses solely handles the management of clients.

The shift is a welcoming one that will add value to our health industries in our different communities and the world at large. And therefore should be embraced, but time should be given by the different parastatals and stakeholders involving in this process. It's a delicate move and a lot should really be put in place before this kind of move can really be a meaningful one.

5.3. Recommendation

The federal and state government and also non governmental agencies should all participate in this move. Already qualified staff nurses who had worked for reasonable period of years should be carried along, as they are the potential administrators, in the various departments of the health industry especially in the nursing department.

Collaborative efforts should be made with foreign Universities both with those engaging in both distant learning programmes and conventional programmes pertaining to nursing fields and programme such certificates should be evaluated by the Nigeria university commission and the nursing councils and should be accepted if such measures up to the required standard accepted universally.

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