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Professionalism from the perspective of nurses with advanced practice

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Abstract

Introduction: Professionalism is a multidimensional and dynamic concept that can be understood and interpreted differently depending on time, job position, or culture context.

Objective: To investigate how nurses with advanced practice interpret and understand professionalism in the Slovak sociocultural context.

Methods: This qualitative study adopted an interpretative design. The sample consisted of seven advanced practice nurses (APNs). Data were collected between November 2021 and December 2022 using semi-structured interviews. Data were analyzed using reflexive thematic analysis.

Results: Professionalism was interpreted through five meaningful themes: Management support; Professional socialization; Nurse professional; Challenges and problems of professionalism in nursing; Relationships. Advanced practice nurses interpreted professionalism as a multidimensional concept that encompasses several interconnected attributes. Nurses highlighted the role of professional organization, the importance of professional socialization, education, and lifelong learning as important attributes in building and maintaining professionalism – and considered the nurse shortage to be one of the biggest challenges that threatens professionalism.

Conclusion: Advanced practice nurses contribute to the sustainability of the health system. Their understanding and interpretation of professionalism may support the nursing profession in general.

Keywords: Advanced practice nurse; Hospital care; Professionalism reflexive thematic analysis; Qualitative study

Introduction

Although the concept of professionalism has been discussed in the literature for decades, many nursing researchers agree that the phenomenon needs to be further investigated. A considerable number of interpretations of professionalism have led to the development of several conceptual frameworks. Hall (1967; 1968) was the first researcher to describe attributes of professionalism, including using the professional organization as a major referent, belief in public service, belief in self-regulation, sense of calling to the profession, and autonomy. Hall's framework for interpreting and evaluating professionalism has been used to investigate professionalism in various fields (Kim-Godwin et al., 2010). However, it has been shown that due to the specifics of nursing, the framework does not meet the indicators of professionalism in nursing. Miller (1988) developed The Wheel of Professionalism in Nursing. The core of the wheel illustrates university education and scientific background of nursing. The model illustrates eight essential aspects of nursing professionalism. Ghadirian et al. (2014) developed another framework. They identified the cognitive, attitudinal, and psychomotor dimensions of nursing professionalism.

The meaning of professionalism varies across time, contexts, or cultures, so it is challenging to define or measure professionalism (Cao et al., 2023). The multidimensional and dynamic nature of professionalism and its various interpretations lead to many definitions of this concept (Johnson, 2015). The definitions show that professionalism encompasses several different attributes, and these identify and define the nursing profession or the nurse professional. The characteristics of professionalism and the relationships between them are necessary for the provision of quality nursing care, but also for the development of the professionalism of nurses (Al-Eraky et al., 2015). Professionalism is the core element of providing competent, safe, and effective care that includes mutual interaction with the patient, family, community, and healthcare team (Kim-Godwin et al., 2010; Marcinowicz et al., 2020). Minimal attention has been paid to professionalism in the sociocultural context of Slovakia. However, the concept of professionalism in nursing remains vague, poorly developed, and under-researched in our sociocultural context.

Nursing faces many professional and moral challenges related to the global shortage of nurses. These changes create a new environment that requires professional nursing and stimulates research into this phenomenon. In 2005, the Interna-

tional Council of Nurses (ICN, 2005) provided an official statement on advanced nursing practice. Advanced nursing practice and different levels of advanced nursing are growing in providing various health services around the world (Schober, 2016). ANP refers to quality extended healthcare services and interventions provided by nurses whose advanced capacities influence clinical healthcare outcomes and provide direct health services (ICN, 2020). These nurses significantly contribute to the advancement of a profession based on adequate education. Implementing advanced practice is related to the status of nursing in a country, and its ability to introduce a new role or level of nursing (European Federation of Nurses Associations, 2022). In line with the growing demand for healthcare services, the need to implement advanced practice has also become evident in Slovakia. In 2018, Regulation No. 95/2018 Coll of the Ministry of Health of Slovakia was issued (Ministry of Health of the Slovak Republic, 2018). This regulation considered education and the length of nurse clinical experience in the position in terms of competencies. Nurses were divided into four categories (nurse, specialist nurse, nurse with advanced practice, and nurse manager). A nurse with advanced practice (APN) is defined as a nurse with a master's degree in nursing, specialization in the relevant field, and at least five years of clinical experience. APN can be further defined as a nurse with a master's degree in nursing and at least eight years of clinical experience. The new competencies of these nurses should improve the nurse's position as an equal partner of the physician and contribute to greater autonomy. APNs participate, for example, in managing the work of the nursing team, verifying and analyzing records in the nursing documentation, making decisions, and taking responsibility for implementing interventions that meet the patient's needs, and following the treatment plan prescribed by the physician. APNs are characterized by the integration and application of a wide range of theoretical and evidence-based knowledge that occurs as part of nursing university education (ANA – American Nurse Association, 2012; Hamric and Tracy, 2019) and are one of the main healthcare professionals that can improve high-quality of healthcare. Supporting advanced nursing roles has increased quality, safety, and cost-effectiveness of healthcare delivery.

In Slovakia, APNs play the most critical role in strengthening professionalism (Schober, 2016). The role has improved healthcare management, patient care efficiency, health outcomes, and contributes to the sustainability of the health system.

Materials and methods

Aim
Our study aimed to investigate how nurses with advanced practice interpret and understand professionalism in the Slovak sociocultural context.

Design
This qualitative study adopted an interpretative design with the aim of adding to the understanding of how APNs interpret professionalism in the Slovak context. The study was carried out according to the COREQ checklist (Tong et al., 2007) and was approved by the Ethics Committee of the Jessenius Faculty of Medicine in Martin, Comenius University in Bratislava (EC no. 79/2021).

Sample
A university hospital in Slovakia was asked to participate in the research study. After granting consent, participants were selected from the given hospital using the purposeful method. Our study included a sample of APNs. Inclusion criteria for APNs were: (a) worked in an adult care unit; (b) had a master's degree in nursing; (c) completed a specialization training in the field of practice; (d) had work experience of at least 5 years. APNs were not included if they: (a) did not provide informed consent; (b) occupied a managerial position or administrative management role. The sample consisted of seven APNs. All participants provided written informed consent prior to enrollment in the study. The sample characteristics are reported in Table 1.

Table 1. Sample characteristics					
Participant	Position	Gender	Age	Nurse experience (in years)	Unit
APN1	Advanced practice nurse	Female	38	10	Orthopedic
APN2	Advanced practice nurse	Male	33	11	Intensive surgical
APN3	Advanced practice nurse	Female	39	17	Intensive surgical
APN4	Advanced practice nurse	Female	48	25	Pneumological
APN5	Advanced practice nurse	Female	51	33	Surgical
APN6	Advanced practice nurse	Female	42	21	Cardiological
APN7	Advanced practice nurse	Female	36	12	Orthopedic

Data collection
Data were collected between November 2021 and December 2022 using in-depth, semi-structured, face-to-face interviews, which lasted up to 52 minutes. The main interview questions focused on the interpretation of professionalism in nursing, the characteristics of professional and unprofessional aspects of the work of nurses, the professional status of nurses, and the challenges of professionalism in Slovakia. The interviews were conducted by an experienced researcher at the conven-

ience of the participants (time and location). Data were collected until the achievement of the study's information power (Braun and Clarke, 2022). All interviews were recorded on an audio recorder and transcribed verbatim.

Data analysis
Data were analyzed by two independent researchers (DK, KŽ) using Atlas.ti 9. Reflexive thematic analysis was used in the data analysis (Braun and Clarke, 2022). Reflexive thematic

analysis offers an accessible and robust method for developing, analyzing, and interpreting patterns in a qualitative data set. Moreover, reflexive thematic analysis has a six-step process which includes (1) familiarization with data, (2) coding the data, (3) generating initial themes, (4) developing and reviewing themes, (5) refining, defining, and naming themes, and (6) integral writing. The triangulation of investigators and peer debriefing was followed to ensure rigor and credibility. To improve the trustworthiness of the study, the peer debriefing included an expert in qualitative research (JČ) and a member of the research team (RK) in four phases of reflexive thematic analysis (phases 3, 4, 5, and 6). Reflexive thematic analysis led to the development of themes and subthemes.
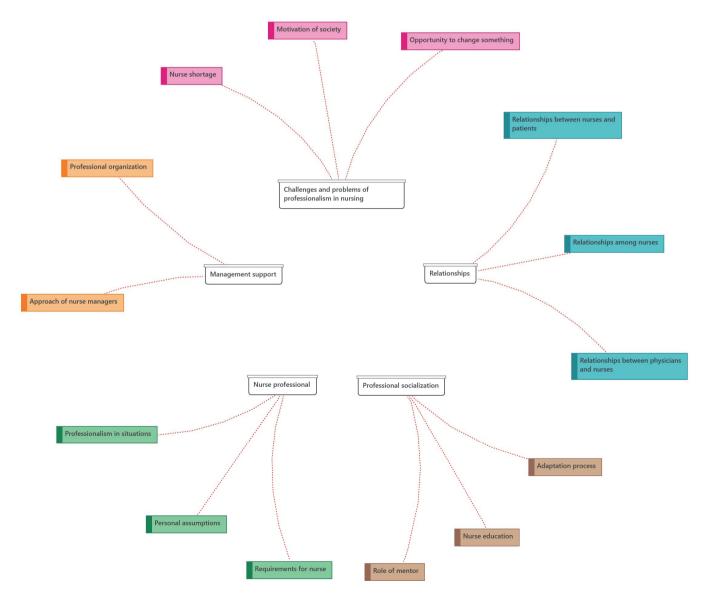
Results

The concept of professionalism was reflected by the APNs in five main themes: Management support; Professional socialization; Nurse professional; Challenges and problems of professionalism in nursing; Relationships (Scheme 1).

The theme of Management support was specified by two subthemes: Approach of nurse managers and Professional organization.

In the first subtheme, the requirements and demands of APNs for the approach of managers were illustrated, according to which managers should direct work and individual activities: "… *there should probably be support from the management as well… The management of the leading nurses, that is also important*" (APN7). This, however, was often absent: "… *they do their own things in the office, their work, they have no reach and no overview of what will be done…*" (APN6). Ensuring material and technical equipment or repairs did not allow NMs to perform the tasks arising from their competences. Absent management support in resolving conflicts in the physician-nurse relationship had a negative effect on the relationships among nurses: "… *You do not have those in the workplace who will stand up for you in front of those physicians… what the physician says is holy*" (APN4).

In the second subtheme, APNs mainly reflected on unfulfilled expectations of the professional organization. According to the nurses, promotion of nursing profession and retention

Scheme 1. Professionalism from the perspective of APNs

of nurses in the profession are important roles of the Slovak professional organization: *"They should also work a little... They have the means, everything, so that the management can motivate those people ... attract new ones... to know how to support them"* (APN7). In addition to improving their financial situation, it was also important for nurses to increase their social status: *"They still only deal with salaries... I cannot even listen to it anymore when our representatives in the media express themselves... They should rather focus on the professional status of nurses"* (APN4). Nurses expressed a positive opinion about the professional organization: *"... I see this effort... that they will listen to those ministries, that yes it will be, and we simply see the development of those tendencies... but I cannot say anything negative in this regard..."* (APN2).

The theme Professional socialization was specified by three subthemes: Nurse education, Role of mentor, Adaptation process.

The first subtheme illustrated the necessity and importance of education, which was supported by the following statement: *"... education or every course for nurses can actually increase their qualities"* (APN6). The importance of education was also confirmed by another nurse: *"... I am a more valuable nurse for them* (doctors) *when I know what we are talking about and I can also oppose them, ... so I can justify it"* (APN1). In this context, lifelong learning also stood out, representing the path of self-improvement and professional growth of every nurse: *"... to acquire new information, knowledge, and practical skills. These are such challenges that we must always, constantly improve in our profession... we must not stagnate in one place"* (APN4).

In the second subtheme, APNs reflected on the demands placed on a mentor and the importance of a positive role model for students. Leadership of students and organization of practical teaching by experienced nurses was considered a vital component of the professional training of nurses: *"I have been mentoring for about 10 years, I can change my habits or behavior, communication, and it is certainly important that I can influence the student"* (APN6). They should also be good at demonstrating their professionalism: *"... you just have to maintain yourself, so that it does not happen that you do not know how to answer the students' questions, you just do not know how to show them something, you do not know how to expand their knowledge... and that forces you to always do something"* (APN3).

The third subtheme illustrated the integration of novices into the new work environment. A personal role model was important for professionalism. One of the nurses described a positive experience with the training nurse: *"She taught me... She treated the patient nicely, was skilled, had knowledge, also the human approach, but also towards me as a younger nurse... Even though I messed up something, she never humiliated me"* (APN4). Nurses perceived the positive and negative role of team cooperation in the adaptation process: *"There is a good team and there is a bad team, you will join a bad team and you will simply do the work... but when the team wants to improve then you will feel good about the work"* (APN3).

The theme of Nurse professional was specified by the following subthemes: Professionalism in situations, Personal assumptions, Requirements for nurse.

The first subtheme reflected the behavior of nurses in situations that occur in practice. Nurses should be prepared to handle even challenging situations, often influenced by the patient's health condition: *"... yelling at the patient when we know that the patient can be agitated, aggressive... being able to engage in communication with the patient, I will not yell at them* (patients)*..."* (APN2). One nurse described a situation during the round when the nurses disrupted the very process and at-

mosphere: *"... that they just talk to each other, it is disturbing, it is extremely unprofessional and disrespectful to the patient... we dishonor the profession"* (APN3). During the round, there were also situations where the patient's privacy was violated: *"... they uncovered the wound, the others saw it too... it has a bad effect on both the other patients and the patient himself/herself... it is shocking"* (APN5).

In the second subtheme, APNs expressed their expectations of what personal assumptions and qualities nurses should have to cope with the profession: *"They should be empathetic, so communicative, assertive that they can stand up for their opinions, and know to hold one's position and function... some kind of benevolence, solidarity. There should also be the nice appearance of the nurse..."* (APN7). Another nurse described what she expected from a nurse and what she/he considered important: *"... she/he loves her/his job and performs every single task humanely and very professionally"* (APN1).

In the third subtheme, participants expressed their demands for the professional requirements that nurses must meet, for example, with respect to education: *"Definitely education also, so nurses need to know what they can do within the profession, how to work in a team, they should be skilled, have communication skills at some level... some degree of self-reflection"* (APN2). One nurse considered the requirement for a functional team to be important to professionalism and commented on this in the context of the COVID-19 pandemic: *"... definitely be collegial on the team. I think now after the pandemic, the relations have worsened... Many teams have broken up... simply, do not play for yourself, but simply be there for the team, because since the nurses cannot do anything by themselves, the team has to be here"* (APN3).

The theme Challenges and problems of professionalism was specified by three subthemes: Opportunity to change something, Nurse shortage, Motivation of society.

The first subtheme pointed out that the impossibility of changing something is frustrating and suppressed nurses' professional development and motivation for change: *"... young people who want to change something... are so pushed into line that they basically do not stand out because we are unfortunately used to such a system and we will not change it"* (APN2). One of the APNs drew attention to the need to change the stereotypes that affect the professionalism of the nurse: *"There are nurses who have graduated from vocational school, and they do not go any further. I also have colleagues... they are really skilled, but when we are discussing some topics, they fumble..."* (APN4).

The second subtheme reflected on the issue of the insufficient number of nurses in the healthcare system, the quality of care provided, and the professionalism of the nurses' work: *"... If a nurse had two rooms like that, she/he could be a professional nurse, otherwise when a nurse has 18 patients, she will never be a professional. Because she has no opportunity to be a professional nurse..."* (APN5).

In the third subtheme, participants reflected on their professional position. The societal status of the profession has not increased and it has not received the importance it deserves. Even the COVID-19 pandemic has not improved it, in fact the opposite: *"... well, bad..., because people thought that we were only killing patients..., so when you got to the hospital, you automatically got ventilation. At that time, many people with ventilation died...and people thought that we* (personnel) *did not threat them"* (APN4). One of the APNs said: *"... they dishonor the profession, especially society, politicians, the public, physicians. No one respects that nurse"* (APN2). Another of the nurses thought that the evaluation of nurses was mainly related to a person's age: *"... the older generation sees nurses as nurses with a capital N,*

and there are younger generations, that is, in our society, who see a nurse as a nurse with a small N, who is basically like a supplement to the physician" (APN6).

The theme of Relationships was specified by the following subthemes: Relationships between physicians and nurses, Relationships between nurses and patients, Relationships among nurses.

In the first subtheme, APNs reflected on the quality of their relationships with physicians, which could not be characterized as equal: *"... an old physician does not allow himself as much as a young one... I do not like that, because I do not think I should be underestimated, but they take it that way, God, you are just a nurse, hey, but I think we are on the same level, everyone has their responsibilities, but after all, we are also one team"* (APN3). However, according to nurses, respect for other professions was absent among physicians: *"... that society educates those physicians in the context that I am a physician. And when those young physicians come, even if they have 20 years of experience... because they are physicians and nurses cannot help them"* (APN4).

In the second subtheme, the relationships between APNs and patients were illustrated as follows: *"... that the profession of nursing has declined... how patients treat nurses, how relatives treat them... I do not know if the profession once had as much weight as it does now"* (APN3). Relationships could also be affected by generational differences: *"... we had such an older patient, ... how she perceived what the nurse said, ... she respected everything. You had a patient who was ten or twenty years younger, and he was already like, what are you going to tell me, what do you want me to do... so we can already see the generational differences in the perception of this profession"* (APN2).

The relationships among nurses are illustrated in the third subtheme. The nurses who made up the team expected responsibility and professional behavior. One of the APNs described the relationships as follows: *"... that is exactly the pressure, simply one cannot keep up, does not comply... also some conflicts in the team. Then we have the provision of care itself, when we know that this must be done aseptically and, at that time, it will not be done as it should be. This is actually a violation of professionalism for me... using dishonorable words, treating patients like they are nothing, not respecting dignity..."* (APN7). Another APN expressed it as follows: *"... Teamwork fails, e.g., the handoffs about the patient are insufficient... that can actually endanger the patient as well, some nurse forgets, withholds information during the handoffs"* (APN5).

Discussion

In our study, nurses with advanced practice understood professionalism as a multidimensional and dynamic concept that covers several interconnected attributes. APNs emphasized professional organization, professional socialization, the requirements for a professional nurse, and the social status of nurses.

The nurses highlighted the role of the professional organization in maintaining the professionalism of nurses in the context of unmet organizational expectations. The importance of professional organization has also been highlighted by Hall (1967; 1968), Miller (1988), and Fatemi et al. (2018). The APNs in our study expected more support in the propagation of the nurse profession in society. Although professional organizations are making efforts to involve their members in health policy (ANA – American Nurses Association, 2012; Canadian Nurses Association, 2012), this role remains unfilled for various reasons (Vandenhouten et al., 2011). Boswell et

al. (2005) consider the implementation of the nurse's political role, which includes, among other things, knowledge of issues, laws, and health policy, being involved in the advancement of the nursing profession, and the building of political awareness into education. This may contribute to the fact that nurses see their role exclusively as providing nursing care to patients and, as Cramer (2002) states, this leads to the inability to see the "big picture" behind the hospital setting, regarding the factors that determine the distribution of health services and how policies are generated. The nurses in our study expressed that their expectations from the Slovak professional organization are mostly unfulfilled. They negatively evaluated the lifelong learning process, financial issues, and also described a lack of activities that if present could motivate nurses to stay in the profession and attract more young people to study nursing. They consider increasing social status important; low status has a negative impact on clinical and professional autonomy. The importance of autonomy and what this means for the performance of the profession have been confirmed by several authors (Kramer et al., 2006; Papathanassoglou et al., 2012).

Nurses also highlighted the importance of professional socialization. Integration of nursing students into medical teams, particularly nursing teams, during their undergraduate education is a prerequisite for professional practice. Emphasis is placed on the participation of nurse mentors in the professional preparation of nursing students. The ability of students to articulate their core values learned at an early age will help them form their own professional identity (Kelly, 2020; Skela-Savič and Kiger, 2015). APNs emphasized the inclusion of novice nurses in the work environment and the importance of positive personal role models (experienced colleagues, team members) for their professionalism. The adaptation process is intended to facilitate the period of integration, orientation, and familiarization with the new work environment. During this period, the nurse solves the conflict that occurs due to the transition from graduation to full professional role, which depends on the congruence between the values, norms, and expectations of education and the reality of work performance. Nurses who do not progress beyond the shock stage may never fully demonstrate their professionalism (Moradi et al., 2017).

Another important theme APNs highlighted is education. Participants emphasized formal education and personal requirements for nurses. Advance practice nurses pointed out the necessity and importance of education that supports their qualification and qualities. They are convinced that they are more valuable to physicians when they can oppose them and justify the provision of nursing care. Lifelong learning represents a path to self-improvement and professional growth. Dingwall and Allen (2001) state that the caring and emotional aspects of nursing are somewhat devalued in society today. Nursing is becoming increasingly 'technical' due to advanced medical technology and nurses are expected to develop mainly 'technical competence'. However, a nurse's acceptance by patients, colleagues, and co-workers is essential to build their self-confidence.

A significant theme was the nurse shortage, which APNs consider a threat to professionalism and professional performance. The persistent difficulties of insufficient nursing staff have been exacerbated by the COVID-19 pandemic. The APNs pointed out that it is not possible to be professional if nurses care for a large number of patients. Delegating tasks to nursing assistants without the appropriate competences will not solve this problem, but instead deepens this problem and endangers professionalism of nurses even more. However, nurses in our study perceived that COVID-19 pandemic positively influ-

enced the public awareness of how many nurses are missing in the healthcare system. Since the problem of nurse shortage is persisting for a long-time, nurses have experienced exhaustion and fatigue. Therefore, Slovak nurses expect time off rather than higher salaries. The shortage of nurses, the impact on quality and safety of care, and patient outcomes are reflected in several studies and reports (Chan et al., 2013; ICN, 2023). The shortage of nurses can lead to unprofessional behavior in nurses. Nurses should be prepared to handle challenging situations, often influenced by the patient's health condition. APNs demonstrated unprofessional behavior through absent communication skills, inappropriate communication with a student or patient, private problems interfering with work, ineffective care, disrespect for intimacy, or interference of the nurse's personal opinions or prejudices in the nurse's behavior toward the patient.

The study has several limitations. One of these is the selection of only one university hospital in Slovakia; therefore, the results might be influenced by the organizational characteristics of this one hospital and the similar professional values of nurses included in our study.

Conclusion

Professionalism is considered a fundamental aspect of nursing and a key element in providing quality and safe nursing care. Based on the results of our study, in the Slovak sociocultural context, professionalism can be understood and interpreted as a multidimensional and dynamic concept that includes several main attributes, such as the role of professional organization, the importance of professional socialization, education, and lifelong learning. Several challenges and problems, such as a nursing shortage or lack of nurse motivation, can negatively affect the maintenance of professionalism.

Conflict of interest
The authors have no conflict of interest to declare.

Data availability statement
The data that support the findings of this study are available from the corresponding author upon reasonable request.

Ethics approval statement
The study was approved by the Ethics Committee of the Jessenius Faculty of Medicine in Martin, Comenius University in Bratislava (EC no. 79/2021).

References

1. Al-Eraky MM (2015). Twelve Tips for teaching medical professionalism at all levels of medical education. Med Teach 37(11): 1018–1025. DOI: 10.3109/0142159X.2015.1020288
2. ANA – American Nurses Association (2012). About ANA. [online] [cit. 2023-05-13]. Available from: http://www.nursingworld.org/FunctionalMenuCategories/ AboutANA
3. Boswell C, Cannon S, Miller J (2005). Nurses' political involvement: responsibility versus privilege. J Prof Nurs 21(1): 5–8. DOI: 10.1016/j.profnurs.2004.11.005.
4. Braun V, Clarke V (2022). Thematic analysis: A practical guide. London: Sage Publications, 376 p.
5. Canadian Nurses Association (2012). Nursing and the political agenda. [online] [cit. 2023-05-13]. Available from: http://www.Cnaaiic.ca/en/advocacy/nursing-and-the-political-agenda
6. Cao H, Song Y, Wu Y, Du Y, He X, Chen Y, et al. (2023). What is nursing professionalism? a concept analysis. BMC Nurs 22(1): 34. DOI: 10.1186/s12912-022-01161-0.
7. Chan ZC, Tam WS, Lung MK, Wong WY, Chau CW (2013). A systematic literature review of nurse shortage and the intention to leave. J Nurs Manag 21(4): 605–613. DOI: 10.1111/j.1365-2834.2012.01437.x.
8. Cramer ME (2002). Factors influencing organized political participation in nursing. Policy Polit Nurs Pract 3: 97–107. DOI: 10.1177/152715440200300203.
9. Dingwall R, Allen D (2001). The implications of healthcare reforms for the profession of nursing. Nurs Inq 8(2): 64–74. DOI: 10.1046/j.1440-1800.2001.00100.x.
10. European Federation of Nurses Associations (2022). EFN Policy Statement on EU Advanced Practice Nursing [online] [cit. 2023-05-18]. Available from: https://efn.eu/wp-content/uploads/2022/04/EFN-Policy-Statement-on-APN-April-2022.pdf
11. Fatemi NL, Moonaghi HK, Heydari A (2018). Exploration of nurses' perception about professionalism in home care nursing in Iran: a qualitative study. Electron Physician 10(5): 6803–6811. DOI: 10.19082/6803.
12. Ghadirian F, Salsali M, Cheraghi MA (2014). Nursing professionalism: An evolutionary concept analysis. Iran J Nurs Midwifery Res 19(1): 1–10.
13. Hall RH (1967). Some organizational considerations in the professional-organizational relationship. Adm Sci Q 12(3): 461–478. DOI: 10.2307/2391315.
14. Hall RH (1968). Professionalization and Bureaucratization. Am Sociol Rev 33(1): 92–104. DOI: 10.2307/2092242.
15. Hamric AB, Tracy MF (2019). A definition of Advanced Practice Nursing. In: Tracy MF, O'Grady ET (Eds.) Advanced Practice Nursing: An integrative approach. St. Louis: Elsevier, pp. 61–79.
16. ICN – International Council of Nurses (2005). The scope of practice, standards and competencies of the Advanced Practice Nurse. [online] [cit. 2023-05-18]. Available from: http://cambodiancouncilofnurse.com/wp-content/uploads/2017/05/Scope-and-Standards-of-nurse-practitioner_ICN.pdf
17. ICN – International Council of Nursing (2020). Guidelines on advanced practice nursing. [online] [cit. 2023-05-18]. Available from: https://www.icn.ch/system/files/documents/2020-04/ICN_APN%20Report_EN_WEB.pdf
18. ICN – International Council of Nursing (2023). Recover to rebuild: investing in the nursing workforce for health system effectiveness. [online] [cit. 2023-05-21]. Available from: https://www.icn.ch/news/icn-report-says-shortage-nurses-global-health-emergency
19. Johnson JA (2015). Nursing professionalism: innate, taught, or caught? J Nurs Prof Dev 31(2): 114–115. DOI: 10.1097/NND.0000000000000149.
20. Kelly SH (2020). The hidden curriculum: Undergraduate nursing students' perspectives of socialization and professionalism. Nurs Ethics 27(5): 1250–1260. DOI: 10.1177/0969733019881714.
21. Kim-Godwin YS, Baek HC, Wynd CA (2010). Factors influencing professionalism in nursing among Korean American registered nurses. J Prof Nurs 26(4): 242–249. DOI: 10.1016/j.profnurs.2009.12.007.
22. Kramer M, Maguire P, Schmalenberg CE (2006). Excellence through evidence: the what, when, and where of clinical autonomy. J Nurs Adm 36(10): 479–491. DOI: 10.1097/00005110-200610000-00009.
23. Marcinowicz L, Shpakou A, Piatrou S, Fejfer-Wirbal E, Dudzik A, Kalinowska P, et al. (2020). Behavioural categories of professionalism of nurses in Poland and Belarus: A comparative

survey. J Clin Nurs 29(9–10): 1635–1642. DOI: 10.1111/jocn.15226.

24. Miller BK (1988). A model for professionalism in nursing. Today's OR nurse 10(9): 18–23.

25. Ministry of Health of the Slovak Republic (2018). Regulation No 95/2018. [online] [cit. 2023-05-21]. Available from: http://www.epi.sk/zz/2018-95/znenie-20180401#Share

26. Moradi Y, Mollazadeh F, Jamshidi H, Tayefeh T, Zaker MR, Karbasi F (2017). Outcomes of professional socialisation in nursing: A systematic review. J Pharm Sci Res 9(12): 2468–2472.

27. Papathanassoglou ED, Karanikola MN, Kalafati M, Giannakopoulou M, Lemonidou C, Albarran JW (2012). Professional autonomy, collaboration with physicians, and moral distress among European intensive care nurses. Am J Crit Care 21(2): e41–e52. DOI: 10.4037/ajcc2012205.

28. Schober M (2016). Introduction to Advanced Nursing Practice. An International Focus. Cham: Springer International Publishing, 178 p.

29. Skela-Savič B, Kiger A (2015). Self-assessment of clinical nurse mentors as dimensions of professional development and the capability of developing ethical values at nursing students: A correlational research study. Nurse Educ Today 35(10): 1044–1051. DOI: 10.1016/j.nedt.2015.04.003.

30. Tong A, Sainsbury P, Craig J (2007). Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. Int J Qual 19(6): 349–357. DOI: 10.1093/intqhc/mzm042.

31. Vandenhouten CL, Malakar CL, Kubsch S, Block DE, Gallagher-Lepak S (2011). Political Participation of Registered Nurses. Policy Polit Nurs Pract 12(3): 159–167. DOI: 10.1177/1527154411425189.