

An Evaluation of the Compatibility of Specialist Nurses' Units and Their Areas of Expertise*

Uzman Hemşirelerin Uzmanlık Alanlarına Uygun Birimlerde Çalışma Durumlarının Değerlendirilmesi

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Abstract

Aim: This study was carried out to evaluate whether specialist nurses work in units that match their areas of expertise.

Method: This is a descriptive study. The data were collected from 83 specialist nurses working at university hospital in November and December 2019. A nine-item questionnaire was used to assess demographic characteristics of the nurses, their specializations, workplaces, and the compatibility of their areas of expertise.

Results: It was determined that the largest group of specialist nurses (24.1%) were in the field of surgery, and the fewest were specialists in nursing education (2.4%) and public health (2.4%). The specialists in nursing principles, surgery, internal medicine, and nursing management predominantly had managerial roles. Most of the specialists in women's health nursing were worked in bedside units, and most of the pediatric health specialists were in special units. Of the specialist nurses, 65.1% thought they were working in units that suited their expertise, but most of those who did not think so (68.97%) had not submitted requests to work in more suitable positions.

Conclusion: Most of the specialist nurses were employed in appropriate positions that suited their areas of expertise.

Keywords: Nursing duties, nursing specialties, specialist nurses.

Öz

Amaç: Bu çalışma uzman hemşirelerin uzmanlık alanlarına uygun birimlerde çalışma durumlarını değerlendirmek amacıyla yapılmıştır.

Yöntem: Tanımlayıcı tasarımdaki çalışmanın verileri, 2019 yılının Kasım ve Aralık aylarında bir üniversite hastanesinde çalışan ve araştırmaya katılmayı kabul eden 83 uzman hemşireden toplanmıştır. Veri toplama aracı olarak, hemşirelerin demografik özelliklerini, uzmanlık alanlarını, çalıştıkları alanları ve uzmanlık alanları ile çalışma alanlarının uygunluğunu sorgulamayı hedefleyen dokuz soruluk form kullanılmıştır.

Bulgular: Çalışmaya katılan uzman hemşirelerin uzmanlık alanları incelendiğinde en yüksek oranda %24,1 (n:83) cerrahi hastalıkları hemşireliği alanında, en düşük oranda %2,4 (n:83) ise hemşirelikte eğitim ve halk sağlığı hemşireliği alanlarında uzmanlaşmanın tercih edildiği belirlenmiştir. Hemşirelik esasları, cerrahi hastalıkları hemşireliği, iç hastalıkları hemşireliği ve hemşirelikte yönetim alanlarında uzman olanların ağırlıklı olarak yönetici roller üstlenmişlerdir. Kadın sağlığı hemşireliği alanında uzman olanların çoğunlukla servislerde, çocuk sağlığı alanında uzman olanların ise çoğunlukla özellikli birimlerde çalıştıkları saptanmıştır. Uzman hemşirelerin %65,1'inin uzmanlık alanlarına uygun alanda çalıştıklarını düşündükleri, ancak böyle düşünmeyenlerin çoğunluğunun (%68,97) uzmanlık alanlarına uygun olan bir alanda çalışmakla ilgili herhangi bir istek ilemedikleri belirlenmiştir.

Sonuç: Uzman hemşireler büyük oranda uzmanlık alanlarına uygun alanlarda istihdam edilmektedirler.

Anahtar Sözcükler: Hemşirelik görevleri, hemşire uzmanlıkları, uzman hemşireler.

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Introduction

Nursing education has continuously evolved to ensure the delivery of quality health care. Undergraduate nursing education began in Türkiye in 1955. Since then, postgraduate nursing programs have also been developed (Saraç et al., 2017). The master's programs in nursing at Hacettepe University started in 1968, and the university's doctoral programs began in 1972 (Başlı and Metin, 2022; Ergöl et al., 2011; Kıran and Taşkiran, 2015). Increased number of graduate nursing programs allowed nurses to increase their knowledge and skills in specific areas, interpret and apply their knowledge, and contribute to science. The job description in the nursing regulation is made in general and does not cover each specialty area but, the duties of expert nurses have not been determined in the field of application.

A doctorate equips its holder with the skills and knowledge needed to carry out original research independently. This involves using evidence, applying theoretical frameworks, and employing various models to investigate and solve complex problems (Ardahan and Özsoy, 2015; Arslan Yürümezoğlu and Kocaman, 2024; Boehning and Punsalan, 2023; Dönmez et al., 2018; Kocaman and Yürümezoğlu, 2015). Scientists trained in nursing should research subjects that are needed in the field and apply their results (Saraç et al., 2017). Putting the results of thesis studies into practice is necessary for evidence-based nursing practices and for the provision of quality nursing care. In order for specialist nurses to be effective researchers and to put research findings into practice, it is important for them to understand the research process and to be able to understand and critically evaluate research findings (Uysal Toraman et al., 2013).

The number of master's and doctoral nursing programs in Türkiye is increasing all the time (Arslan Yürümezoğlu and Kocaman, 2024; Kocaman and Yürümezoğlu, 2015; T. C. Measurement, Selection and Placement Center, 2019). Nurses' desire to produce and disseminate new knowledge, to learn to do research, and to pursue academic careers has increased their interest in postgraduate education (Dönmez et al., 2018; Gördes et al., 2020). Today, universities in Türkiye offer master's and doctoral programs for nurses (Ardahan and Özsoy, 2015; Çiftçi, 2014; Dağcı et al., 2019). In the last 18 years, the number of postgraduate nursing students has increased by a factor of 5.3 (Saraç et al., 2017). Specialist training in nursing is offered in these fields: surgery, internal diseases, women's health, child health, public health, psychiatry, fundamentals of nursing, nursing management, and nursing education in Türkiye.

In Türkiye, a nurse may become a "specialist nurse" by post-graduate master's education. Article 8 of the Nursing Law defines specialist nurses as "Undergraduate nurses become specialist nurses after they have completed postgraduate education in their profession and after their diplomas have been registered by the Ministry of Health." Nursing graduate programs consist of at least seven courses, a seminar course, and a thesis, with a total of not less than twenty-one credits. Its duration is four semesters, and the program is completed in a maximum of six semesters, and consists of a total of at least 120 ECTS credits (Higher Education Council, 2016).

In addition to their basic nursing roles, specialist nurses take responsibility for the programming, implementation and evaluation of clinical knowledge, skills, health research, consultancy services, health education services for their field of expertise, implement and evaluate them (Law Amending the Nursing Law, 2007).

It is also necessary to be a certified nurse to work in specific areas such as dialysis, diabetes, and intensive care. Nurses who have worked in those units should get a certificate. Although the relevant directive provides priority for management positions for specialist nurses, specialist nurses are often employed according to the needs of the field, outside of their field of expertise. However, specialist nurses must be employed in positions that are compatible with their field of expertise in order to apply their training and expertise.

An authoritative international organization representing nurses worldwide, these guidelines aim to support the recognition and development of advanced practice nursing roles in different healthcare systems. It highlights the importance of establishing consistent and transparent regulatory mechanisms to recognize and license specialist practice nursing across different countries (International Council of Nurses, 2020; Köse, 2020).

Specialist nurses are internationally referred to as 'advanced practice nursing,' 'advanced practice nurse,' 'advanced practice registered nurse,' 'clinical nurse specialist,' or 'nurse practitioner' (Schober, 2020). The specialist nurse role focuses on delivering high-quality, accessible health care and disease prevention through direct patient interactions, supported by the right to practice independently (Hudspeth and Klein 2019; Ryder et al., 2019; World Health Organization [WHO], 2020). Specialist nurses are advanced practice nurses who have acquired additional education and clinical experience within a specific area of nursing. They play diverse roles in healthcare settings, including direct patient care, education, research, and leadership positions. These roles can vary by their areas of expertise, ranging from surgical specialties to nursing education, public health, women's health, pediatric health, and nursing management (Boehning and Punsalan, 2023; Decock et al., 2022, Hudspeth and Klein 2019; Ljungbeck et al., 2021; WHO, 2020).

Evidence shows that these nurses improve access to primary health care in both rural and urban settings, particularly for vulnerable populations. When supported to make full use of their training, specialist nurses can effectively deliver primary and preventive care, contributing significantly to universal health coverage. While the field of specialist nursing is growing and enhancing the appeal of nursing careers, the recognition and licensing of these roles vary significantly across countries. (WHO, 2020). There is agreement in the literature about the lack of consistent standards in specialist nurse practice, roles, education, and nomenclature (Boehning and Punsalan, 2023; Decock et al., 2022; Dury et al., 2014; Hudspeth and Klein, 2019; Ljungbeck, et al., 2021). According to the Global Strategy on Human Resources for Health: Workforce 2030, 78 (53%) of the responding countries reported having specialist nurse roles (WHO, 2020).

The studies reveal significant heterogeneity among specialist nurses across the 18 EU countries. This heterogeneity encompasses various aspects, including specialization fields, educational backgrounds, and training programs. The article highlights that the variation in the qualifications and training of specialist nurse could potentially impact the quality of nursing practice. The study emphasizes the need to harmonize the qualifications and training of specialist nurses across EU countries (Decock et al., 2022). This study has identified variations across Europe in the education, certification, regulation, and scope of practice for specialist nurse and emphasized the need to improve standards for education. (Dury et al., 2014). The scoping review of this article revealed the differences in the curriculum of specialist nurses and the core competencies expected upon graduation, and identified the professional role and autonomous practice that educators need to focus on when developing specialist nurse education (Ljungbeck et al., 2021).

Qualified healthcare services rely significantly on the nursing workforce. When the data related to the education and employment of nurses are accurately assessed, it will have a corrective impact on various areas, from the quality of the healthcare services provided to workload reduction (Köse, 2020). A nurse with a high level of professionalism is crucial as skilled manpower is the most important resource to ensure the quality of care (Aiken, et al., 2017; Arslan Yürümezoğlu and Kocaman, 2024). Nurse manpower planning is critical to ensure safe and uninterrupted delivery of health services and the targeted quality of care, because the quality of nursing care is affected by many factors, and therefore, nurse recruitment is a multidimensional decision-making process (Soydaş and Harmancı Seren, 2023; Özkan and Uydacı, 2020; WHO, 2020). Nursing employment criteria; nurse-patient ratio, daily nursing care hours per patient, nursing care hours, structure of the nursing team or proportion of professional nurses in the nursing team, nursing care hours provided by external sources, length of professional experience of nurses in the unit and nurses' workload (Türkmen, 2015). In Türkiye, healthcare workforce planning is generally based on the number of beds or population, and it has been noted that the number of nurses is lower compared to other countries (Alramazanoğlu and Altay, 2024). According to the Health Statistics Yearbook 2022 report, there are 3.5 nurses per 1,000 people. This figure indicates that Türkiye has the lowest number of nurses per 1,000 people among European Union and OECD countries, approximately three times lower than in other countries. Moreover, although this data for Türkiye includes both nurses and midwives, there is a significant difference when compared to European and OECD countries. In 2021, the number of nurses with master's and doctorate degrees was 1,221. There are 0.014 specialist nurses per 1,000 people. (Republic of Türkiye Ministry of Health, Health Statistics Yearbook 2022, 2024, Arslan Yürümezoğlu and Kocaman, 2024). In order for the qualifications obtained during postgraduate education to be reflected in health outcomes, nurses need to be employed in accordance with their competencies (Köse, 2020; Soydaş and Harmancı Seren, 2023; Torun, 2015). Nurse associations and policy makers should advocate for the harmonization of specialist nurse qualifications and training across healthcare systems and countries. There should be an agreement in Türkiye on the consistent standards in specialist nurse practice, role, education and positions that are their field of expertise. Although there have been positive developments in specialized nursing in our country, high school and associate degree graduates and other health personnel have continued to be employed as nurses.

Method

Aim: This study was carried out to evaluate whether specialist nurses work in units that match their areas of expertise.

Type of Study: This is a descriptive study.

Research Questions:

- Which undergraduate programs did the specialist nurses complete?
- In which units do the specialist nurses work, and what are their duties?
- Are the specialist nurses' areas of expertise compatible with their units?

Study Population, Sample and Setting: The study was performed in a university hospital because of the high number of specialist nurses. Totally, 758 nurses were being employed in the hospital during the study. However, 670 of those nurses were working. The number of specialist nurses was 98. The study sample consisted of 83 specialist nurses who agreed to participate.

Inclusion Criteria: All the nurses who were working at the university hospital during the study, who completed postgraduate education and were qualified as specialist nurses, were included in the study.

Exclusion Criteria: Nurses with undergraduate and lower-level education were excluded.

Data Collection Tool: The data were collected using a nine-item questionnaire prepared by the researchers after reviewing the literature (Kocaman and Yürümezoğlu, 2015; Saraç et al., 2017). The questions are to evaluate the nurses' demographic characteristics, fields of expertise, units, and the compatibility of their units with their expertise. The Kuder-Richardson reliability coefficient of the items was .78.

Data Collection: One of the researchers visited the specialist nurses individually and gave them the questionnaires.

Data Analysis: Frequency and descriptive analyses were conducted to analyze the data.

Ethics: Approval was obtained from the ethical committee of a university (05.11.2019-A-01). Formal approval was obtained from the hospital management. Furthermore, each specialist nurse was informed by the researcher about the aim of the study, and only those who were willing to participate were included. No information about the identity of the participants was collected.

Limitations: This study could not be conducted in a larger sample. In addition, the study was conducted at a single institution.

Findings

Table 1. The nurses' mean age and years of experience (N=83)

Personal and professional characteristics	Minimum	Maximum	Mean	Standard Deviation
Age	27.00	57.00	39.17	6.02
Years of professional experience	1.00	21.00	8.20	4.93
Years of institutional experience	4.00	31.00	15.53	6.45
Years since qualifying as a specialist	3.00	31.00	14.14	6.50

Descriptive Characteristics

Table 1 shows that the mean age of the nurses was 39.175 (SD=6.02). The nurses' mean years of professional experience was 15.53±6.45, and their mean years of institutional experience was 8.20 (SD=4.93). Since the study was conducted only with specialist nurses, all of them had completed at least one graduate program.

Table 2. The nurses' specializations (N=83)

Variable	Groups	n	%
Field of expertise	Nursing principles	7	8.4
	Surgery	20	24.1
	Internal diseases	14	16.9
	Child health	11	13.3
	Women's health	4	4.8
	Mental health	6	7.2
	Public health	2	2.4
	Nursing education	2	2.4
	Management	17	20.5

The largest group of nurses were specialists in surgery at the highest rate (24.1%), and the fewest were specialists in nursing education (2.4%) and public health (2.4%) (Table 2).

Units and Duties of Specialist Nurses

This section describes units and duties of the specialist nurses.

Table 3. The nurses' units (N=83)

Field of Expertise	Surgery	Pediatrics	Women's health	Internal diseases	Public health	Education	Management	Mental health
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)
Nursing principles	2 (28.6%)	0	0	4 (57.1%)	0	1 (14.3%)	0	0
Surgery	11 (55%)	1 (5%)	1 (5%)	6 (30%)	0	1 (5%)	0	0
Internal diseases	2 (14.3%)	0	0	11 (78.6%)	1 (7.1%)	0	0	0
Child health	4 (36.4%)	7 (63.6%)	0	0	0	0	0	0
Women's health	0	1 (25%)	1 (25%)	2 (50%)	0	0	0	0
Mental health	2 (33%)	0	0	1 (16.7%)	0	0	0	3 (50%)
Public health	1 (50%)	0	0	1 (50%)	0	0	0	0
Education	1 (50%)	0	0	0	0	0	1 (50%)	0
Management	9 (52.9%)	2 (13.3%)	0	6 (35.3%)	0	0	0	0

Among the nurses, 85.7% of the specialists in nursing principles and 78.6% of the internal diseases specialists were working in units aligned with their areas of expertise (Table 3).

Table 4. The specialist nurses' duties (N=83)

Field of Expertise	Service Nurse	Special unit nurse	Manager	Polyclinic nurse
	n (%)	n (%)	n (%)	n (%)
Nursing principles	1 (16.7%)	1 (16.7%)	4 (66.7%)	0
Surgery	5 (27.8%)	3 (16.7%)	6 (33.3%)	4 (22.2%)
Internal diseases	5 (35.7%)	1 (7.1%)	6 (42.9%)	2 (14.3%)
Child health	2 (18.2%)	6 (54.5%)	3 (27.3%)	0
Women's health	2 (50%)	0	1 (25%)	1 (25%)
Mental health	1 (20%)	2 (40%)	2 (40%)	0
Public health	1 (100%)	0	0	0
Education	0	1 (50%)	1 (50%)	0
Management	6 (37.5%)	2 (12.5%)	7 (43.8%)	1 (6.3%)

Most of the specialists in nursing principles, surgery, internal diseases, and management had managerial roles. Half of the women's health specialists worked in the polyclinic (50%, n: 1), and most of the children's health specialists worked in special units (54%, n: 6) (Table 4).

Specialist Nurses' Opinions on the Compatibility of Their Units and Their Expertise

Table 5. The specialist nurses' opinions about the compatibility of their units and their expertise (N=83)

Variable	Category	n	(%)
Do you think that your unit suits your field of expertise?	Yes	54	65.1
	No	29	34.9
If not, have you filed a request to transfer to a more suitable unit? (n=29)	Yes	9	31.03
	No	20	68.97

Most nurses thought (65.1%, n=54) that their expertise suited their units of those who did not think this, most (68.97%, n=20) had not submitted a request to transfer to a more compatible unit (Table 5).

Discussion

Today, there are nine postgraduate nursing majors: nursing principles, internal diseases, surgery, women's health, children's health, mental health, public health, nursing education, and nursing management (Ardahan and Özsoy, 2015; Arslan Yürümezoğlu and Kocaman, 2024; Kocaman and Yürümezoğlu, 2015; Council of Higher Education, 2015). There are also programs in oncology nursing, occupational health nursing, emergency nursing, intensive care nursing, internal medicine nursing infection control nursing, and diabetes nursing. The nurses in this study specialized in one of these nine majors after their undergraduate studies. However, in this study, some specialties such as surgery and nursing management were more popular than the others. This is due to the personal preferences of nurses. There is no data on the distribution of specialist nurses in Türkiye. It may also be due to the uneven distribution of faculty in these nine departments. With insufficient resources for departments and higher education institutions in Türkiye, the lack of faculty remains an important problem. The recent increase in the number of undergraduate and postgraduate programs offered by foundation universities has led to the hiring of paid or part-time faculty members from other universities and the departure of faculty members from public universities. This limits the number of students and can lead to the closure of existing graduate programs (Arslan Yürümezoğlu and Kocaman, 2024; Kocaman and Yürümezoğlu, 2015). In nursing graduate programs, the number of newly enrolled graduate students has increased by 2.3 times and the number of PhD students has increased by 2.7 times in the last 10 years (Arslan Yürümezoğlu and Kocaman, 2024). Unplanned increases in enrollment and a shortage of faculty have drawn the attention of recent studies of nursing schools. In fact, the departure of faculty members eventually caused some nursing undergraduate programs to fail to meet the Council of Higher Education's requirement that each department should have at least three faculty members (Arslan Yürümezoğlu and Kocaman, 2024; Kocaman and Yürümezoğlu, 2015; Tuna, 2015; CHE, 2015). It has also been reported that the distribution of teaching staff in nursing schools across institution and provinces is unbalanced (Arslan Yürümezoğlu and Kocaman, 2024; Kocaman and Yürümezoğlu, 2015; Tuna, 2015). WHO suggests that addressing the global shortage of nurse educators can be supported by collaborative efforts, such as resource pooling resources across institutions and countries (WHO, 2020). As a result of this study, it can be shown as one of the reasons that can explain the imbalance in the distribution of the number of nurses in specialization among the departments. In the study, it is considered as a desirable and satisfactory situation that the majority of specialist nurses are employed in units related to their expertise. In a study conducted with nurses in England, within the scope of the Specialization Project, it was stated that specialization facilitates and increases the performance and organizational development of nurses (Hardy et al., 2006). In the USA, specialist nurse licensure is based on specialist nurse education and certification, which is a competency-based within population foci (Hudspeth and Klein, 2019). A study evaluating the role of specialist nurses have found that they contribute to improved patient safety and quality of care (Ljungbeck et al., 2021). Specialist nurses are crucial for improving care in underserved areas, particularly in Eastern and Southern Africa, where investment in pediatric nursing is aimed at reducing child mortality. About 3,650 specialist nurses with a 12-month postgraduate diploma are currently working in these regions, and efforts are underway to enhance data collection and planning for children's health. Meanwhile, in Poland, nurses with specific qualifications can now prescribe medications, reflecting a shift in primary care management and nursing education since 2016 (WHO, 2020). This study showed that the employment of highly trained specialist nurses in emergency departments shortened patients treatment time, improved waiting times by 38.67% to 53.66%, and reduced work intensity of doctors (Atalan et al., 2018). This study determined that nurses with a higher level of education demonstrated better professionalism (Dikmen et al., 2016). These findings also support the findings of the current study, which emphasizes the importance of specialization and the necessity of compatibility between the area of specialization and the assigned unit.

In the USA, the importance of specialization in nursing increased in the first quarter of the 20th century; master's and doctoral programs were opened. The components of these programs have evolved over the years, with a focus on advanced scientific training in the nursing discipline. The purpose of these trainings is to train specialist personnel by contributing to the development of nursing knowledge (Hudspeth and Klein, 2019; Partovi and Şahin, 2014).

In 1971, the Royal College of Nursing (RCN) in England emphasized the importance and necessity of specialization in nursing. Specialization in nursing started with the training received in undergraduate education and certified training. Thus, with these certificate programs, specialist nurses have begun to be trained in areas such as diabetes management, infection control, palliative care, stoma care, and wound care. Nurses who have completed master's and doctoral programs and certificate training; Specialist nursing roles are defined in four specialties: Clinical Nurse Specialist, Nurse Practitioner, Certified Registered Nurse Anesthetist, and Certified Nurse-Midwife. These nurses have been given the right to independently practice many clinical practices in their areas of expertise (Başlı and Metin, 2022; Topuksak and Kublay, 2010). In Türkiye, specialization in nursing is legally defined by the 'Nursing Law,' which was revised in 2007 (Law Amending the Nursing Law, 2007). The definition of specialist nursing with the Nursing Regulation issued in 2010 and 2011 "Specialist nurse: The nurse who specializes in her profession by receiving postgraduate education and whose diploma is registered by the Ministry". In addition, the job descriptions of nurses according to their fields of specialization were also made in detail (Nursing Regulation, 2010; Regulation on Amending the Nursing Regulation, 2011). In nursing graduate programs, the number of graduating students has increased by 2.3 times and the number of PhD students has increased by 2.7 times in the last 10 years. (Arslan Yürümezoğlu and Kocaman, 2024).

One study found that success and satisfaction in the professional experience were highly correlated with the level of expertise. As a result, it was stated that nurses need more on-the-job experience than reported in the literature to develop clinical nursing expertise (Bobay et al., 2009). These findings support the findings of the current study indicating that there should be compatibility between specialist nurses' areas of expertise and the units they work in. On the other hand, it is thought that the nurses who do not demand to work in alignment with their fields of specialization may be due to the fact that they are happy working in the units they work in or because they think that their demands will not be taken into account.

Although there have been positive developments in specialized nursing in Türkiye, high school and associate degree graduates and other health personnel continue to be employed as nurses. Specialized nurses are not being placed in positions appropriate to their areas of expertise in which they have completed their training. Hospital administrations determine the positions of nurses and generally assign them to units where there is a shortage of staff. This situation causes specialized nurses to work outside their areas of competence and expertise (Başlı and Metin, 2022; Çelik et al., 2011; Türkmen, 2015). In addition, this situation causes the professional nurses to be insufficient in the areas of practice and unable to conduct research at the desired level; therefore, the professional knowledge remains insufficient and the nursing profession in our country lags behind compared to developed countries (Başlı and Metin, 2022; Çelik et al., 2011). A qualitative study identified the main problems in the professionalization process of the profession, including diversity in the level of vocational education, differences in employment types, low levels of professional autonomy and organization (Özlük and Sur, 2017). As a result, although specialization in nursing is not legally defined, nurses work in many different units of health institutions. However, they cannot obtain any specialization title specific to the unit they work in. This situation prevents nurses from specializing. For example, a nurse works in the intensive care unit for 5 years and improves herself in that field. However, when he is appointed to another hospital, he may be assigned to a different unit. This situation prevents the use of previously acquired knowledge and skills (Köse, 2020; Torun, 2015). As a result, although specialist nurses are trained in master's and doctoral programs, employment in health services cannot be provided according to their fields of expertise (Köse, 2020; Soydaş and Harmancı Seren, 2023; Topuksak and Kublay, 2010).

Conclusion and Recommendations

Most of the nurses were specialists in surgery, and the fewest were specialized in nursing education and public health. The specialists in nursing principles and internal diseases were working in relevant units, and nurses specialized in nursing principles, surgical diseases, internal diseases, and management had predominantly managerial roles. Most of the specialists in women's health were working in polyclinics, and most of the specialists in children's health were employed in special units. The majority of the participants thought that they were working in units that suited their expertise, but those who did not think so had not submitted requests for transfer to a more suitable unit. These results also support the hypothesis of "Specialist nurses work in units that suit their areas of expertise" put forward at the beginning of the study.

Based on these results we recommend that postgraduate nursing education should be planned better according to the requirements of the nursing care field. Specialist nurses should be employed in their fields of expertise. This employment principle may provide to serve effective and holistic nursing care to the patients. In our country, we recommend that studies on the quality of patient care and patient outcomes of nurses working in specialty areas should be increased.

When the study results are evaluated as a whole; In nurses' should provide equal expertise and employment of in nine departments. Specialist nurses should employed according to their areas of expertise. Obtaining the desired efficiency and holistic nursing care from specialist nurses employed according to their areas of expertise and it should be recommended to increase specialization in nursing. Nursing institutions and regulatory bodies should work towards recognizing and promoting the importance of specialization in nursing.

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