Professional and academic destination of masters in nursing graduates: A national survey

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Summary Master's degrees, especially in the form of coursework master's programmes are becoming the main conduit for continuing professional education to the professions. However, there is a paucity of literature on the academic or professional destination of nurses following the completion of master's degrees in nursing. A cross-sectional postal survey of 322 graduates from masters in nursing programmes in Ireland was undertaken. Former students were surveyed regarding their professional and academic destinations subsequent to graduation. The majority of graduates were employed in clinical nursing followed by a substantial number working in the area of nurse education, mainly at the grade of college lecturer. The vast majority of graduates had achieved promotional grades following the master's degree. A minority of graduates indicated a desire to undertake further study at degree level. Those that did were following or intended to follow PhD level studies. However, the majority of graduates did not view the degree as a pathway to a PhD but as an integral part of their continuing professional education and related to clinical practice. There is a reversal of the trend seen in Ireland and the UK in the mid to late 1990s in which the majority of graduates followed career pathways in nurse education. Although there has been an increase in the number of nurses completing master's level education over the last five years unemployment of underemployment of graduates is not yet an issue.
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Introduction

Universities have always been involved in professional education. In the past the emphasis was placed on professional undergraduate education.

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However, increasingly, as professional associations, employers and governments introduce requirements for continuing professional education, the university sector is becoming involved in the development of programmes at postgraduate level especially through the development of professional master's degrees (Eraut, 1994; Skilbeck, 2001). There is an increasing recognition of the

importance of these coursework master's programmes aimed at mid-career professionals as opposed to masters purely by research degrees. However, despite the exponential growth of students undertaking master's programmes, little is known of the destination of graduates following completion of the degree. The aim of this study is to identify the academic and professional destination of nurses who graduated with masters' degrees in nursing. Graduate destination surveys are important in that they enable nursing departments plan strategically as well as informing prospective students of the academic and professional value of the degree. Graduate destination surveys also inform health service employers of patterns and trends in employment.

Literature review

A literature search was conducted using the databases Medline, CINAHL and ERIC. A combination of the following key words was used: nurse education, graduate education, graduate destination, destination survey, and outcomes of master's level education. Papers from the 1990s to the present day were searched. The search identified very few studies that specifically dealt with master's level education in nursing and none that surveyed the destination of master's graduates following the completion of their degree.

The master's degree

Traditionally the master's degree was a pathway to career in research and the completion of a PhD however it is increasingly becoming a form of continuing education for the professions in its own right (Higher Education Policy Institute, 2004). In the US 85% of master's programmes now fall into the category of professional master's degrees (LaPidus, 1997) and this trend is developing internationally.

The growth in nurses studying to master's level is generally aligned to changes in nurse education; specifically the migration of nurse education into the university sector. In Ireland preregistration nurse education, which entered the tertiary sector fully in 2002, is based on a four-year degree programme. The consequence of fully integrating nurse education into the university sector is that there has been an exponential growth in the number of nurses now undertaking postgraduate level education. This growth in nurses undertaking postgraduate education is seen internationally in coun-

tries with nurse education systems similar to Ireland including the UK (UKCC, 1987, 1998), the US (Ellis and Hartley, 2001), Australia (Commonwealth of Australia, 2002), Japan (Primimo, 2000), Sweden (Andersson, 1999), the Czech Republic (Tothova and Sedlakova, 2007) and Spain (Yarnoz, 2002). Nurses are now completing postgraduate degrees with the aim of practicing at advanced educational, managerial or clinical levels.

Little has been found in the literature on the rationale for nurses completing a higher degree. Studies completed in other disciplines however have identified a number of reasons including the enhancement and development of career or promotional prospects (Hardwick and Jordan, 2002), the ability to increase earning potential (Astin, 1993), the need to acquire advanced professional and research capabilities (Atkins and Redley, 1998) or the desire to change career (Burgess, 1997). Empirical evidence also indicated that completing a degree not only impacts on the career one chooses but also on progression within that career (Pascarella and Terenzini, 1991). In relation to postgraduate education, career progression and career development are the main motivating factors for undertaking further study. Hardwick and Jordan (2002) identified a number of motivating factors that influenced nurses and midwifes to undertake graduate level education including the need to extend personal knowledge of nursing as well as a need to update academic qualifications following the introduction of university preregistration nurse education programmes. There is also evidence that health service employers are promoting and funding nurses to complete higher degrees as a means of aiding retention, which has become a global problem in the profession (Aiken et al., 2003; Meehan et al., 2005).

Although little is known regarding the career progression of nurses with postgraduate degrees, the majority of nurses leaving college with an undergraduate nursing degree remained in clinical practice for a decade or more following graduation with the majority completing post-registration clinical courses as opposed to postgraduate academic programmes (Ring, 2002). However, little published information exists on the career outcomes or academic pathways of graduates following the completion of higher degrees in Ireland or the UK. Evidence that does exist tends to be in unpublished master's or doctoral theses (Whyte et al., 2000). There is some evidence that suggests that the majority of graduates with master's degrees tend to be found in management and educational sectors of the health service (Gibbon and Luker, 1995). This is similar to other professions where graduates with higher degrees tend to

occupy high-status senior positions within a relatively short-time following graduation (Santos et al., 1998). However, with the recent introduction of clinical and advanced clinical practice pathways within master's programmes and the overall change in the education of nurses this trend of the majority of graduates being situated in non-clinical roles may be changing. There is also a need to examine whether the proliferation of the degree is leading to an underemployment of unemployment of graduates.

Underemployment and unemployment of master's graduates

There is evidence that due to the proliferation of the master's degree in all educational disciplines underemployment and unemployment of master's graduates may become an issue (Connor, 1997; Dugdale, 1997; Knight, 1997). The impact of the masters in nursing degree in terms of unemployment or underemployment on graduates is not known. In the current healthcare climate it is unlikely that masters in nursing graduates will be unemployed, however underemployment may be an issue. Research in other countries has shown that even if graduates with a postgraduate degree are underutilised in the early part of their career they tend to gain promotion within a relatively short period of time (Dugdale, 1997). There is anecdotal evidence that this is happening in nursing where new positions are being created as individuals within the profession acquire postgraduate degrees.

This paper surveys graduates' subsequent professional destination and academic destination following completion of their master's degree. The rationale of measuring professional destination is to ascertain the extent to which graduates remained in clinical practice or whether they undertook employment in education or management roles (the traditional destination of nurses who had previously completed master's degrees). A further aim of measuring academic destination was to ascertain whether graduates perceived the master's degree as a final or terminal degree or as a pathway to further study, most notably doctorate level education.

Methods

Research design

This study utilised a cross-sectional survey of graduate's professional and academic destination following completion of a master's programme from the six universities/colleges that provide master's level education in the Republic of Ireland. The research questions posed were (a) What is the professional destination of graduates following completion of their master's degree? (b) What is the academic destination of graduates following completion of their degree?

Sample

A total of 322 students who had graduated between the years 2000 and 2005 were surveyed. The rationale for choosing students that had graduated between these years was to identify the immediate outcomes that had occurred in recent graduates as well as measuring career attainment and the academic pathway of students who had graduated a number of years previously. Graduates were contacted by post informing of them of the study and inviting them to participate. Students who completed masters in midwifery degrees were excluded from the survey (this was due to ongoing research on these students in other universities). Students who had not completed or deferred their degree were also excluded from the survey.

Survey questionnaire

The survey questions measuring graduate destination were part of a larger survey undertaken as part of a PhD measuring graduate outcomes following the completion of a masters in nursing programme (Drennan, 2007). Six questions, developed by the researcher, were used to measure academic and professional destination. Survey questions also ascertained whether graduates perceived that the degree had an impact on their career development and the extent to which they intended to pursue further education. Face and content validity of the questions was ascertained through the use of the cognitive interviewing technique. Cognitive interviewing is a technique whereby respondents' verbal reports, undertaken during the pre-testing phase of questionnaires, are analysed prior to instruments being distributed (Dillman, 2000; Drennan, 2003). This process ascertains respondents understanding of questions from their perspective rather than from the perspective of the researcher.

Data analysis

Data obtained was analysed by computer using the Statistical Package for the Social Sciences (SPSS) version 14.0. Descriptive statistics (frequencies,

frequency per cents, measures of central tendency, and measures of variability) were used to summarise demographic data and results from the destination survey.

Ethical approval

Access and ethical approval was sought and received from each of the appropriate committees in the institutes of higher education and all six university/college-based Schools of Nursing approached agreed to take part in the study. The intention was not to compare institutions, and universities/colleges were notified of this point, but to survey the destination of graduates on a national level. Students were informed about the nature of the research and that they were entitled not to participate in the study if they so decided. Due to the procedures adopted by all universities in this study, direct access was not permitted to the contact details of the students. However, the universities agreed to mail questionnaires on behalf of the researcher.

Results

Profile of the sample

A total of 322 graduates were surveyed, 220 replied resulting in a response rate of 68%. Over 85% were female. The graduates were aged approximately forty years and were clinically experienced with, on average, seventeen years of professional experience at the time of the study (Table 1). Seventy per cent had completed a bachelor's degree prior to commencing the master's programme, however 30% of students gained entry to their master's programme without a bachelor's degree. Entry in these cases was gained on the applicant possessing a higher/postgraduate diploma qualification in a clinical speciality.

Professional destination

The destination of students following the completion of their master's programme revealed that over 50% of graduates were practicing in clinical nursing (staff nurse/clinical nurse manager grades) with approximately 25% indicating that they were working in the area of nurse education. Sixteen per cent were employed in nursing management with a tenth reporting that they were employed in research or other roles. Only 2% of master's graduates indicated that they were now employed outside of the health

Table 1 Demographic, academic and professional profile of master's graduates

Characteristic	N = 220
Age in years M, (SD), (minimum−maximum)	38.5 (7.2) (25−56)
Years qualified M, (SD), (minimum−maximum)	16.8 (7.3) (3−36)
Gender (%) (n)	
Female	85.8 (188)
Male	14.2 (32)
Professional qualifications[*]% (n)	
Registered general nurse	90.3 (195)
Registered psychiatric nurse	18.5 (40)
Registered nurse intellectual disabilities	5.1 (11)
Registered children's nurse	16.7 (36)
Registered midwife	25.0 (54)
Registered public health nurse	4.6 (10)
Registered nurse tutor	29.6 (64)
Other	8.3 (18)
Academic qualifications[*]% (n)	
Diploma	48.6 (105)
Higher/post graduate diploma	50.0 (108)
Bachelor's degree	69.9 (151)
Master's degree	100 (220)
PhD	0.9 (2)
Other	14.4 (31)
Mode of attendance% (n)	
Full-time	10.4 (23)
Part-time	85.9 (189)
Combination of full-time and part-time	3.7 (8)
Strand masters completed% (n)	
Clinical	34.9 (77)
Education	30.5 (67)
Management	15.5 (34)
Advanced practice	9.9 (22)
Generic/other	9.2 (20)
Employment during master's programme% (n)	
Worked full-time while attending college	81.8 (175)
Worked part-time while attending college	10.7 (23)
Job-shared	4.7 (10)
Other	2.8 (6)

[*] Graduates may hold multiple professional and academic qualifications.

services, generally these graduates were to be found in the pharmaceutical sales industry. Table 2 outlines the extent to which graduates changed grade following the completion of their master's programme when compared to their grade at the commencement of the programme. The largest drop was in the number of graduates who reported that they were employed at staff nurse level. Approxi-

Table 2 Comparisons of graduates' employment grades prior to, and following completion of, a masters in nursing programme

Grade	Prior to masters % (n)	After masters % (n)	Percentage change %
Staff nurse	30.6 (64)	8.8 (19)	−21.8
Clinical nurse manager — Grade I	5.9 (11)	2.8 (6)	−3.1
Clinical nurse manager — Grade II	31.9 (69)	21.9 (45)	−10
Clinical nurse manager — Grade III	2.8 (6)	3.7 (8)	+0.9
Director/ assistant director of nursing	4.2 (9)	15.8 (34)	+11.6
Tutor	11.6 (25)	6.5 (14)	−5.1
Lecturer	0.5 (1)	17.8 (37)	+17.3
Clinical nurse specialist	6.5 (14)	5.1 (11)	−1.4
Advanced nurse practitioner	0.0 (0)	6.5 (14)	+6.5
Clinical placement coordinator	1.4 (3)	2.3 (5)	+0.9
Other	4.6 (10)	8.8 (19)	+4.2

promoted, only a fifth indicated that obtaining a master's degree had not been influential in them obtaining a new grade.

Respondents were further asked where their professional interests lay in the future. The majority of graduates (44.2%) indicated that their professional interests were mainly focused on clinical practice with thirty percent indicating that their professional interests were in the area of teaching or academia with over a tenth identifying management or research as the main focus of their career following graduation.

Academic destination

In relation to further study following completion of the master's programme approximately 9% of graduates had enrolled for advanced degree or further education programmes with 19% stating they intended to enrol for an advanced degree in the future (Table 3). Programmes that students had enrolled on or intended to enrol on included; higher/postgraduate diplomas in Nurse Education or Risk Management, Masters of Business Administration and PhD programmes. Of those who enrolled

mately a third had been employed at staff nurse level on commencing their master's programme however this proportion had dropped by a fifth to under 10% following the completion of the master's programme. The grades to which graduates were promoted following completion of the master's programme included director/assistant director of nursing, lecturer, and advanced nurse practitioner (ANP) (ANP is similar to the post of consultant nurse in the UK) (Department of Health, 1999). The proportion of graduates obtaining a director/assistant director grade jumped by a tenth, a lecturer grade by 17% and at ANP grade by nearly 7% when compared to their grade at the commencement of the programme. The grades with the greatest drop in numbers included staff nurse (which dropped by a fifth) and a 5% reduction in those who had been at tutor grade at the commencement of the master's programme.

The impact of the master's degree on subsequent promotion was deemed by graduates to be influential with over 80% of those who had changed grade or been promoted to a higher grade indicating that this had occurred as a result of holding a master's degree in nursing. Of those who had been

Table 3 Graduates enrolment or intention to enrol in advanced programmes following graduation

Variable	% (n)
Enrolled in an advanced programme within a year of graduation	
Yes	8.9 (19)
No	91.1 (195)
Type of advanced programme enrolled[*]	
Advanced practice (Module of MSc nursing)	16.7 (2)
PhD	33.3 (4)
Fellowship in nursing	8.3 (1)
Higher/postgraduate diploma in nurse education	41.7 (5)
Intend to enrol in an advanced programme	
Yes	19.2 (38)
No	80.8 (160)
Type of advanced programme graduate intends to apply for	
PhD	80.0 (28)
Higher/postgraduate diploma nurse education	8.6 (3)
Other — (e.g. MBA, MSc, Higher Diploma Risk Management)	11.4 (3)

[*] Respondents who indicated they enrolled for an advanced programme within a year of graduation.

on a doctoral programme subsequent to graduation, all were employed as college lecturers. Of those who stated they intend to apply for a PhD the majority (61.6%) were also at lecturer/nurse tutor level however, a number of clinical grades also indicated an intent to apply; these included clinical nurse managers (15.4%), assistant directors/directors of nursing (7.7%) advanced nurse practitioner (3.8%) and other grades (clinical placement co-ordinator, researchers) (11.5%). However, over 80% of graduates expressed no intention to enrol for a higher or advanced degree in the foreseeable future, indicating that the majority of graduates viewed the masters in nursing degree as their terminal degree.

Discussion

The aim of this study was to identify the academic and professional destination of graduates who had completed masters' degrees in nursing. Subsequent to graduation the majority of graduates were employed in clinical nursing with a substantial number also employed in the area of nurse education. Graduates who were promoted following completion of their master's degree indicated that holding the qualification was influential in enabling them gain promotion. In contrast a majority of graduates identified that they had no plans to study for a PhD or similar award following completion of their degree. Those that did were mainly employed in the area of nurse education.

It is evident that the master's degree in nursing is not viewed by graduates as a pathway to a PhD but a qualification in its own right that has a pivotal role in providing continuing education to the profession. The perception that the degree is no longer perceived as a pathway to a PhD but an integral part of professional education was evident in the finding that the vast majority of graduates surveyed in this study had not, nor intended to use the degree as a pathway to a PhD but viewed the degree as a capstone of their academic career and integral to their professional education. Although not directly asked in the survey, this was the principal reason why graduates did not progress onto doctoral studies. This terminal nature of the master's degree has led to criticism of its place in academic levels, however, as Katz (2005) argues this does not mean the degree as a capstone of a graduate's academic career makes it less effective or important than other academic levels, including the PhD:

'At too many institutions, especially those with doctoral programmes, this narrow-sighted view of the master's degree remains a tenet of received wisdom. The view is often summed up in a single dismissive adjective: the ''terminal'' master's. But ''terminal'' can have more than one meaning, referring not just to timely cessation…but (as a noun) to a place of transition and possibility…the master's degree is a gateway to multiple doors and each door leads to a different destination' (Katz, 2005, p. 15).

Katz (2005, p. 46) further refers to this view of the master's degree as little more than an interim pathway to a PhD or a consolation prize for those not able to complete a PhD as 'subtractive fallacy, where the master's degree is considered to be just like the doctorate, only less so'. The master's degree, and more so the professional coursework master's degree, is increasingly being perceived as an important degree in its own right, especially in the provision of continuing education to mid-career professionals. This was reinforced in the US with the publication of *A Silent Success: Master's Education in the United States* (Conrad et al., 1993) where it was identified that the master's degree was not just a pathway to the PhD but a terminal degree that greatly contributed to the development of professional practice.

Although the vast majority of graduates had no intention of continuing onto doctoral studies, a small minority of graduates had completed, enrolled or intended to enrol for a PhD following completion of their master's programme. Those that had completed or enrolled on a doctoral programme were mainly employed in the area of nurse education where the PhD degree is now perceived as a requisite for a career in academia. Although the numbers of graduates enrolled or intending to enrol on a doctoral programme were relatively low by international standards (National Council for the Professional Development of Nursing and Midwifery, 2006) there are indications that the number of graduates from master's programmes continuing onto doctoral education is set to grow. There is also shift in attitudes from the view that the PhD is a qualification of value only for teaching in the higher education sector to one where it has utility in clinical practice. This was highlighted in the finding that a number of graduates employed in management and clinical arenas expressed intent to enrol on doctoral programmes in the near future. This pattern of increasing numbers of nurses enrolling onto doctoral programmes is similar to patterns in other countries where nurse education has a longer history of being situated in the third-level sector (Roberts and Turnball, 2002; Dowding and Fyffe, 2004). Furthermore as the professional doctorate emerges as a credible option to

the traditional 'big book' PhD there may be an increase the number of clinical graduates undertaking this pathway to the degree (Ellis and Lee, 2005). The professional doctorate is viewed as being more likely to meet the needs of practicing clinical health professionals.

The majority of graduates continued employment in the health services either in clinical, management or educational posts following completion of their degree and this finding adds to the limited evidence that graduate level nurses remain in the profession and tend not to move into other occupations (Whyte et al., 2000; Ring, 2002). Furthermore, the majority of graduates returned to take up clinical posts. This is a reversal of the trend seen in Ireland and the UK in the mid to late 1990s where the majority of graduates from master's programmes left clinical practice to take up posts principally in nurse education with a few obtaining senior management positions (Whyte et al., 2000). The growth in the number of graduates with master's degrees working in clinical practice appears to be a result of the recommendation by the Commission on Nursing (Government of Ireland, 1998) for the profession to develop formalised, multistage clinical career pathways. This has seen the growth of clinical nurse specialist and advanced nurse practitioner posts within the health service. Master's graduates are entering these posts in increasing numbers. In particular the advanced nurse practitioner post requires a nurse to obtain a relevant master's degree to practice (National Council for the Professional Development of Nursing and Midwifery, 2001). This is similar to the US where the majority of nurses working in advanced clinical posts hold a master's degree or higher (Cole et al., 2002; Radzyminaki, 2005). However, the number of master's graduates moving into clinical posts may lead to the trend seen in the UK where there is an emerging crisis in the recruitment of graduates into educational or research posts (Butterworth et al., 2005). As recommended by the Strategic Learning and Research Group (StLAR) in England there is a need to develop flexible career pathways that incorporate practice, research and education (Butterworth et al., 2005). These pathways can, and are being developed through the coursework master's degree in nursing. This is evident in the multiple career pathways that graduates follow on completion of their degree. It will be of note to see if future master's graduates take up innovative conjoint posts between practice and education (Butterworth et al., 2005).

One of the primary reasons students attend a third-level course, whether undergraduate or postgraduate, is to enhance and develop career or promotional prospects (Astin, 1993; Atkins and Redley, 1998; Hardwick and Jordan, 2002). The findings from this study identified that the successful completion of a master's degree in nursing had a positive impact on career and promotional prospects for graduates. The vast majority of graduates had been promoted and furthermore indicated that this had occurred as a consequence of attaining a higher degree. These findings match the substantial evidence that exists on the impact of formal education on occupational attainment and status that indicates that a third-level education not only impacts on the career one chooses but also on progression within that career (Johnston, 1991; Pascarella and Terenzini, 1991; Whyte et al., 2000; Katz, 2005):

'Not only is education seen as mediating the indirect influence of socioeconomic background; it is also considered to have an important direct effect on occupational status, irrespective of social origins' (Pascarella and Terenzini, 1991, p. 426).

The positive impact of the master's degree on graduates' subsequent employment matches evidence from the UK that suggests those who have taken a higher degree do well in the labour market with 85% of people with postgraduate qualifications employed in professional or managerial positions (Connor, 1997). This trend was also found in this study where the majority of graduates were in senior clinical positions with a substantial number employed in nurse education or nursing management. Of those employed in clinical nursing the majority were in clinical management or specialist nursing roles. The impact of the degree on the achievement of promotion is notable in that at the time of the survey a little under 10% of graduates were at staff nurse level however at the commencement of their programme approximately a third were employed at this grade.

Although the master's degree resulted in graduates achieving promotional posts, the growth in the number of graduates possessing the degree may lead to underemployment or, in some cases, unemployment (Connor, 1997; Dugdale, 1997; Knight, 1997). In the health services it is more likely that underemployment may be the main concern for master's graduates. Underemployment occurs as a consequence of a graduate being overeducated for the job they do. The argument pertaining to overeducation is that a master's degree may raise expectations regarding role or occupational advancement. When these expectations are not met there may be associated job dissatisfaction and the underutilisation of graduates within their profession (Burris, 1983; McGuinness, 2006). Due

to the massification of the master's degree in nursing, graduates may perceive that they are overeducated and underemployed for their post. However, research in other countries has shown that even if graduates with a postgraduate degree are underutilised in the early part of their career they tend to gain promotion within a relatively short period of time (Dugdale, 1997; Santos et al., 1998). Furthermore there is evidence that even though the highest percentage of workers identified as being overqualified for their job in the general population were at master's level, nursing graduates were found to be the exception and were not overqualified for their job (Frenette, 2000). There is also a view that the attainment of promotion and high occupational status by those who hold a third-level qualification is due to the fact that employers perceive graduates developing cognitive skills and problem-solving abilities as a consequence of their college experience (Pascarella and Terenzini, 1991). This suggests that employers see the capabilities developed as a consequence of a degree as having merit for the world of work. Employers perceive graduates as possessing 'the requisite competencies and values that equip one for successful adaptation to complex, high-level…positions' (Pascarella and Terenzini, 1991, p.624). The process of completing a higher degree in itself develops higher order thinking skills that can be applied to senior clinical, managerial and educational positions within the health services.

Limitations

There are a number of limitations to the survey. The cross-sectional design used in this study may have limited the ability to accurately ascertain the point at which the master's degree led to a change in graduate's academic or professional progression. A longitudinal design may have identified the time points at which students changed. However, there were logistical problems in using longitudinal designs with this cohort of graduates due to the number of colleges surveyed. A further limitation was the level of response. Although all graduates from master's programmes were surveyed, not all responded. This could lead to sampling bias and sampling error where the views of those who did not respond were substantially different from those who did respond. However, methods used to decrease sampling error by increasing response rates were based on current evidence-based practice (Dillman, 2000). The relatively high response rate ensured that the sample was as representative of the population of graduates as possible, thus increasing the external validity of the findings.

Conclusion

The vast majority of graduates were promoted subsequent to their master's degree with the majority attributing this change to obtaining the degree. A majority of graduates also remained employed within the health services following completion of their degree. The impact of the degree on employment demonstrates how health service employers positively view master's graduates. The health services needs and values highly skilled, educated workers whose abilities and knowledge ultimately impact on the provision of effective patient and client care. Coursework master's degrees are an important component in the provision of continuing education to the nursing profession. Following on from the findings of this study it is recommended that there be an ongoing evaluation of professional master's programmes in nursing. The changing nature of the work environment challenges educators to determine whether the degree is meeting not only the needs of the students but also of professional practice. Furthermore, in the current climate of managerialism, cost-benefit analysis and value for money audits there is a need to demonstrate to key stakeholders that the degree does have an impact on the development of highly skilled health professionals.

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