















COMMENTARY OPEN ACCESS

Mapping Leadership in Undergraduate Nursing Regulator Standards and Requirements Across Eleven Countries

Kate Frazer¹  | Marie-Louise Luiking²  | Sue Baron³  | Monica Bianchi⁴  | Tiago Casaleiro⁵  |
Martin Červený⁶  | Daniela A. Collins⁷  | Keren Grinberg⁸  | Małgorzata Nagórska⁹  | Joana Pereira Sousa¹⁰  |
Chun Hua Shao¹¹  | Iira Tiitta¹²  | Sigalit Warshawski¹³  | Gerardina Harnett¹⁴ 

¹University College Dublin, Dublin 4, Ireland | ²Leiden University Medical Centre, Leiden, the Netherlands | ³Department of Nursing Science, Faculty of Health & Social Sciences, University of Bournemouth, Bournemouth, UK | ⁴Department of Business Economics, Health and Social Care, University of Applied Sciences and Arts of Southern Switzerland, Manno, Switzerland | ⁵S. Francisco das Misericórdias Nursing School, Lisbon, Portugal | ⁶Department of Nursing, Faculty of Medicine, Pavol Jozef Šafárik University, Kosice, Slovakia | ⁷School of Nursing and Midwifery, London South Bank University, London, UK | ⁸Nursing Sciences Department, Faculty of Social and Community Sciences, Ruppiner Academic Center, Emek-Hefer, Israel | ⁹Faculty of Health Sciences and Psychology, Collegium Medicum, Rzeszów University, Rzeszow, Poland | ¹⁰Nursing School of Coimbra, Health Sciences Research Unit: Nursing, Coimbra, Portugal | ¹¹Department of Nursing, Midwifery & Health, Northumbria University, Newcastle upon Tyne, UK | ¹²University of Eastern Finland, Kuopio, Finland | ¹³Nursing Department, The Stanley Steyer School of Health Professions, Gray Faculty of Medical and Health Sciences, Tel Aviv University, Tel Aviv, Israel | ¹⁴Department of Nursing and Healthcare Sciences, Munster Technological University (Kerry North Campus), Kerry, Ireland

Correspondence: Kate Frazer (kathleen.frazer@ucd.ie)

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1 | Introduction

A significant body of evidence from a recent scoping review underscores the critical role of nurse leadership in education, research, and clinical practice, highlighting its direct impact on care quality, patient safety, nursing student education, workforce outcomes, morale, commitment, performance, and retention (Abdul-Rahim et al. 2025). Conversely, poor leadership practices have been linked to adverse patient and organisational outcomes, substandard learning experiences for nursing students, low patient satisfaction, diminished staff morale, and high turnover rates (Abawaji et al. 2024). In response to these challenges, efforts to develop leadership skills in graduate nurses have gained momentum, exemplified by the recent roll-out of the International Council of Nurses (ICN) and the World Health Organisation (WHO) leadership programme (ICN 2024). Despite this progress, significant gaps remain in understanding how educational strategies can be effectively integrated into undergraduate nursing curricula to support leadership development. This underscores the urgent need to embed structured leadership education for nursing students, complete with defined

competencies for practice, as an essential component of nursing programmes from the first year of study (Baron et al. 2024).

Moreover, evidence (Baron et al. 2024; ICN 2024) emphasises the need to prioritise leadership development for undergraduate nursing students as future inspirational leaders who can effectively lead in diverse situations and contexts while also contributing to shaping complex healthcare systems. Prioritising leadership in undergraduate nursing students is essential to achieve high-quality, safe nursing care and sustain and grow the global nursing workforce (ICN 2024). However, Abdul-Rahim et al. (2025) report evidence of a negative impact of leadership programmes on recent graduates who, upon entering the workforce, often face situations requiring immediate leadership and lack the necessary preparation, which can lead to adverse outcomes. Consequently, newly qualified nurses (NQNs) require ongoing support and mentorship in leadership skills as they transition into their roles. This leadership development may prove challenging due to time constraints from heavy workloads, funding cuts, and a shortage of experienced nurse leaders in clinical practice. Additionally,

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TABLE 1 | Mapping of regulatory standards and requirements for nursing curricula.

| Country information | Leadership is a competency in undergraduate standards for registration Y/N | What year is leadership competency assessed (in undergraduate degree) | Working link to reference document | National regulatory standards for nursing undergraduate students are available (Y/N/Uncertain) |
|---------------------|--|--|---|--|
| Australia | N | Not specified | https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/professional-standards/registered-nurse-standards-for-practice | Y |
| Canada | Y | Not specified | https://www.casn.ca/wp-content/uploads/2023/09/National-Nursing-Education-Framework_2022_EN_FINAL.pdf | Y |
| England | Y | From first year on practice placement with proficiencies aligned to Platforms 5 & 7 NMC Standards of Proficiency (NMC2018, updated 2024) | https://www.nmc.org.uk/standards-for-education-and-training/standards-framework-for-nursing-and-midwifery-education/ | Y |
| Finland | Y | Not specified | https://blogi.savonia.fi/ylesharvointi/2020/01/15/competence-requirements-and-contents-180-ects-credits-for-general-nurse-education/ | N |
| Ireland | Y | From first year on, practice placement as part of the domains of competence | https://www.nmbi.ie/NMBI/media/NMBI/Nurse-Registration-Programmes-Standards-and-Requirements-Fifth-Edition_1.pdf?ext=.pdf | Y |
| Israel | Y | Not specified | https://www.gov.il/BlobFolder/policy/nd156-2019/he/files_circulars_nd_ND156_2019.pdf | N |
| Poland | Y | Not specified | https://dziennikustaw.gov.pl/D2024000151401.pdf | Y |
| Portugal | N | Not specified | In Polish Framework of Competencies for the Generalist Nurse [Registered Nurses] https://diariodarepublica.pt/dr/detalhe/regulamento/190-2015-67058782 | N |
| The Netherlands | Y | From the 1st year of study | https://www.venvn.nl/media/04200a1u/de-nationale-beroepscode-voor-verpleegkundigen-en-verzorgenden.pdf | Uncertain |

(Continues)

TABLE 1 | (Continued)

| Country information | Leadership is a competency in undergraduate standards for registration Y/N | What year is leadership competency assessed (in undergraduate degree) | Working link to reference document | National regulatory standards for nursing undergraduate students are available (Y/N/Uncertain) |
|---------------------|--|---|--|--|
| Slovakia | N | 2nd or 3rd year. It is included within management subject | Vestník MZ SRMinisterstvo zdravotníctva Slovenskej republiky vestnik-202...">https://www.health.gov.sk/Zdroje>vestnik-202... | N |
| Switzerland | Y | Not specified | https://www.bag.admin.ch/bag/it/home/berufe-im-gesundheitswesen/gesundheitsberufe-der-tertiarstufe/bundesgesetz-ueber-die-gesundheitsberufe.html https://www.fedlex.admin.ch/eli/cc/2020/17/it | Uncertain |

students report limited standardisation in leadership and varying expectations among practitioners, policymakers, and educators (Abdul-Rahim et al. 2025). It is critical that nursing students, from the outset, understand the distinction between leadership [vision, motivating and inspiring] and management [systems order and operational] (Jackson 2008), as well as how they, as students, can embody leadership qualities and serve as role models.

Embedding leadership objectives early in nursing curricula would allow sufficient time for effective, evidence-based leadership development and achieving leadership competencies throughout the degree programme. A focus on nurse leadership in undergraduate nursing programmes, which fosters leadership qualities and reinforces leadership as an integral element of every nurse's role, is acknowledged by the ICN (2024), which seeks policies and funding in support of nursing education, development of leadership roles and career advancement and articulation of nurses' societal role in health and wellbeing in a climate of workforce challenges. The European Commission (EC) (2024) reinforces the need for effective leadership and decision-making skills in undergraduate nursing students, recognising these as essential competencies within the broader European context. However, barriers exist, including the traditional focus of curricula on equipping students with clinical skills, including patient assessment and medication management and leaving NQNs ill-prepared without the ‘*necessary leadership and management skills, especially when addressing issues such as life-threatening emergencies, pandemics, or conflicts involving different staff members*’ (Abdul-Rahim et al. 2025, 4).

2 | Mapping Exercise of Publicly Available Regulatory Frameworks for Undergraduate Nurse Education

To determine whether leadership assessment is embedded in existing regulatory frameworks and standards for undergraduate nursing degree programmes and to identify at what point in the curriculum students' leadership knowledge and skills are assessed, the authors of this commentary conducted a mapping exercise of publicly available reports. Table 1 summarises the findings from 11 countries, revealing that 27.3% (*n* = 3) of these countries do not explicitly include leadership as a competency in undergraduate nursing curricula. Only three countries (27.3%) specify the year in which students are introduced to leadership content. One country (Slovakia) integrates leadership within a management module offered in the second or third year of study whereas Ireland, Poland, Australia and Canada report having national regulatory standards for undergraduate nursing curricula. In Canada, learning domain 6, leadership, is defined as social influence in helping achieve health-related goals or improve the healthcare system. In the UK, nursing students must be able to act as role models in managing care, including delegation and supervision, and understand leadership principles and their application in teams for effective decision-making and ‘organisational dynamics and culture’. In contrast, Portugal lacks a specific framework or standards for undergraduate nursing education; instead, student competencies are assessed against a national Framework of Competencies for the Registered Generalist Nurse.

3 | The Implications of Leadership Gaps in Nursing Education

A critical issue is the systemic gap in the developmental pipeline for undergraduate nursing education, exacerbated by a shortage of nursing academics and chronic underfunding. Davidson (2024, 3445) argues that world-class nursing schools must meet regulatory standards and foster “*thought leadership*” in their graduates. This is critical to developing “*confident, competent, and credentialed*” nurses. Davidson (2024) further emphasises the importance of preparing nurses as “leaders who will make a difference in the world” (3447), underscoring their pivotal role in healthcare settings and broader society, particularly in practice and policy development. While credentialing is specific to the United States, with guidelines set by Nursing Regulatory Bodies (NRBs) that vary by state for registered nurses, European nursing regulators operate within a framework of regulations with individual countries publishing national standards and procedures for registered nurses.

4 | What Next

There is consensus on the importance of developing leadership competency within undergraduate curricula. However, the current mapping exercise reveals discrepancies at the country level, allowing national regulators to harmonise language and research through intercountry collaboration and shared learning. This perspective is consistent with calls for a guideline or standardisation within nursing curricula (Abdul-Rahim et al. 2025). Developing skills is crucial in preparing for professional roles within interdisciplinary teams, collaboration, and professional interdependence (van Diggele et al. 2020). Embedding leadership consistently in all nursing education regulatory standards assists future nurses in thriving as practitioners and becoming impactful change-makers across diverse roles, settings, and responsibilities, ultimately fostering equity in nursing leadership and practice—acting ‘*as guides for healthcare teams*’, ensuring quality patient care (1) and requiring skillsets, including critical thinking, problem-solving, decision-making skills, and a knowledge base (Abdul-Rahim et al. 2025). Furthermore, effective healthcare leadership cannot be confined to a top-down model; it must permeate all organisational levels to facilitate sustainable, safe patient care and improve outcomes (van Diggele et al. 2020). Strengthening leadership education in nursing curricula requires a consistent, systematic approach integrating evidence-based frameworks, mentorship programmes, and experiential learning opportunities. Without a unified strategy, variations will persist, potentially leading to inconsistencies in nursing practice and healthcare outcomes within and across countries. van Diggele et al. (2020) remind us that the future ‘*belongs to healthcare education leaders who demonstrate excellence in teamwork*’ (5). As leaders and positive mediators, the next generation of nurses can lead and influence health and socioeconomic policy (Frazer and Davidson 2022). However, achieving this vision will require consistent national regulations and standards aligned with academic nursing curricula.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

No research data were generated for this paper.

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