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## Registration/Licensure: Essential Need of Nursing Regulation in Iran

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### ABSTRACT

Registration/licensure is particularly important in regulation of health system, because public protection, safe and dignity care are the most important goal in health regulation. Registration/licensure of care providers is a solution to for achievement of this goal. Registration/licensure is not a new subject in nursing. Most of the countries, including Iran are focused on nursing Registration/licensure and its planning has been on the agenda of policy makers. This study comparatively describes nursing registration/licensure process in different countries including Iran. this was a descriptive comparative study. The relevant articles and texts were extracted from the websites Ovid PUBMED, Science Direct, CINHALL and ProQuest by using the keywords such as registration/licensure assessment, registration/licensure examination, regulation and nursing. A total of 22 articles, one WHO declaration and report of International Council of Nurses and regulation of Iranian nursing registration/licensure assessment were selected based on inclusion criteria by qualitative evaluation. Inclusion criteria included articles related to nursing registration/licensure in English and Farsi (Persian). Validity and qualitative evaluation of articles were measured by using qualitative article evaluation form developed by Ryan et al in 2007. Registration/licensure process is different in different countries. A national or state-supervised nursing council, association or board is responsible for registration/licensure. In different countries, registration/licensure requires a nursing certification (Diploma, Associate, Bachelor and Master of Nursing) in accordance with education system of that country, physical and mental health, criminal clearances and clinical experience. In some countries, registration/licensure requires a certification of skilled nursing exam. Comparison of regulations of different countries in terms of nursing registration/licensure is influenced by type of legislation, government regulations and socio-economic, political and cultural background of those countries. Assessment of regulation/licensure has positive outcomes for professional staff and care recipients. In Iran, assessment of regulation/licensure will have very positive outcomes in nursing profession and health system. The most important outcomes include ensured regulation/licensure, ethical and psychological competence of care providers in providing the best care with the highest quality.

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**Keywords:** registration/licensure, regulation, safe and dignify care, public protection, nursing

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## INTRODUCTION

Registration/licensure is particularly important in regulation of health system, because public protection, safe and dignity care are the most important goal in health regulation [1, 2]. Registration/licensure assessment of care providers is a solution to facilitate this [3]. Registration/licensure assessment is not a new subject in nursing. Registration/licensure assessment has existed in different countries; for example, regulations of registration/licensure assessment have been formulated in USA in 1903 [4] and in Britain and Ireland since 1919 [4, 5]. Education system is different in various universities and countries; therefore, licensing is required for graduates to start clinical work by confirming their physical and mental health, technical, professional and ethical competence by the competent authorities [6]. An academic degree is necessary but not sufficient for starting clinical work. Thus, registration/licensure assessment is essential considering knowledge, skills, motivation, professional ethics, skills, abilities and general competence [7, 5, 1]. Registration/licensure is particularly important for nursing profession [8], because nurses are responsible for providing care for human which is the noblest of all creatures and has dignity; it is essential to confirm ethical, scientific and practical competence and mental health of nurses to provide quality care [3]. Registration/licensure assessment is associated with many advantages for care providers and recipients [9]. According to Zhong et al.[10], a number of nurses worldwide who lack the sufficient knowledge, skills and professional ethics may inadvertently cause harm to the patient or other staff. By registration/licensure assessment, more educated, more skilled, more motivated and more moral nurses will take the responsibility for caregiving [3]. This will reduce unsafe care given by incompetent people [11] and improve quality of the care, protect the society and promote identity and profession of nurses [9, 4, 3]. Although many Iranian nurses are caring, creative and scientifically and practically competent [12], incompetent nurses are used recently due to the lack of nursing registration/licensure assessment system and the lack of nursing staff; this can reduce quality of care and harm to patients and the society [12]. Registration/licensure assessment can solve this problem. In the last three decades, nursing policy makers have attempted to plan for nursing registration/licensure [13]. Finally, regulations of nursing registration/licensure assessment were formulated by the Department of Nursing in April 2016 [14]. Considering the scientific and technological advancements made in the current century particularly in the health system [15] and the increase in immigrations and globalization [16, 15], regulation/licensure has been associated with challenges in planning and regulations [17]. A solution for these challenges is to assess the studied process in other countries and evaluate advantages and disadvantages of the implemented plans in order to develop and regulate a process which is proportional to the governmental, cultural, social, economic and political context of countries [18-20]; this process can meet the needs of care recipients and promote quality of care [21]. Thus, this study comparatively describes nursing registration/licensure process in different countries including Iran.

## MATERIALS AND METHODS

This was a comparative descriptive study. The relevant articles and texts were extracted from the websites Ovid, PUBMED, Science Direct, CINHAI and ProQuest by using the keywords such as registration/licensure assessment, registration/licensure examination and nursing regulation. Inclusion criteria included articles related to nursing registration/licensure assessment in English and Farsi. At first, 586 abstracts were extracted; by eliminating the repeated articles, the number of articles was reduced to 237. Next, the selected abstracts were evaluated in terms of inclusion and exclusion criteria by using a criticizing instrument for qualitative studies developed by Ryan et al.[22]. Finally, 22 articles, one WHO declaration, one report of International Council of Nurses and regulation of Iranian nursing registration/licensure assessment were selected for the analysis. The articles were selected simultaneously by two separate researches and assessed by four nursing experts (Figure 1).

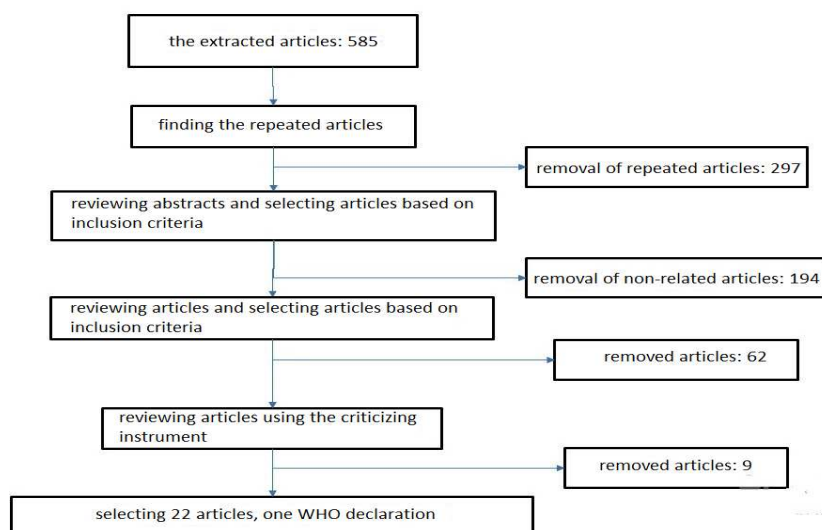


Figure 1: selection of articles

## RESULTS

In different countries, registration/licensure assessment is planned to start the clinical work in order to ensure the achievement of requirements and the required skills. In some countries, registration/licensure has been considered to ensure development of skills and capabilities proportional to changes in the society at certain times. Registration/licensure is different in different countries. A state-supervised nursing council, association or board is responsible for registration/licensure. Requirements of registration/licensure are different in various countries [15]. In different countries, registration/licensure requires a nursing certification (Diploma, Associate, Bachelor and Master of Nursing) in accordance with education system of that country, physical and mental health, criminal clearances and clinical work [15]. In some countries, registration/licensure requires a certification of skilled nursing exam. Accordingly, two processes of registration and licensure have been planned in different countries [23].

### *Registration/licensure assessment for clinical work*

The national registration/licensure assessment exam is held in Singapore, Philippines, Japan, Thailand, Cameroon, Korea and Poland. In Nepal and Mexico, final exam is taken at the end of the undergraduate degree to assess students for receiving certification and starting clinical work. In India and Canada, registration/licensure exam is held in states. In Peru, Russia and Armenia, graduates are given a work permit and nurses do not need registration/licensure reassessment [15]. In Australia and the UK, no exam is held for registration/licensure; the nurses need to attend in the clinical training course to obtain the registration/licensure [23]. Since 2010, Columbia has planned for nursing registration/licensure exam [24]. In the USA, state and national exams are held at the beginning of the career; immigrant nurses also require taking the national exam. In some countries including the USA and Australia, the state exam is only valid in the considered state. In Caribbean countries, a two-day exam is held for registration/licensure assessment; nurses need to take the exam to work in the Caribbean Union. However, this exam is not required in other countries which are not in the Caribbean Union. The nursing board is responsible for registration/licensure; however, the exam is held jointly by the considered countries [15]. In most countries, criminal clearance is also considered for registration/licensure. For example, criminal clearance is checked for registration/licensure in the USA, Canada and Australia [23]. In Philippines and Mexico, the registration/licensure is valid as long as the nurse does not violate the law [15]. In open immigration countries such as the USA and Canada, it is essential to take a language exam, because immigrant nurses are required to communicate well. In addition to language exam, the applicants need to attend in transition courses to adapt to the host country [23]. In the UAE, Bahrain, Qatar, Oman, Kuwait and Saudi Arabia, the applicants need to take a language exam [25].

### *Periodic registration/licensure*

In different countries, registration/licensure is valid for one year, 2-5 years or 10 years [6], considering the level of education and clinical expertise [26]. Once the registration/licensure is expired, the nurses need to stop clinical work

and apply for reassessment [26, 9, 6]. In Canada and India, validity of the registration/licensure is dependent on state laws; in general, however, the registration/licensure is valid for one year in Canada and permanently in most states of India and for 3-5 years in some other states. The registration/licensure is valid for 5 years in the USA, 2 years in China and 3 years in Britain. However, annual payment is required in Britain [15]. In Mexico and Philippines, nurses do not need periodic registration/licensure and their license is valid as long as they do not violate the law [15]. In most countries including the USA, UK, Australia and Canada, the nurses need to attend in continuous training courses [15], have recent clinical work experience and registration/licensure reassessment; it is also required to review documents of registration/licensure assessment of immigrant nurses [23].

### Registration/licensure assessment in Iran

In Iran, the nursing registration/licensure assessment regulation was developed by the Deputy of Nursing, Ministry of Health and Medical Education and approved by the Ministry [13]. According to this regulation, all nursing graduates will need registration/licensure for clinical work by 2020. The applicant will require physical and mental health, background check and passing the national exam. The exam is held in a concentrated form by the Ministry of Health and Medical Education. The registration/licensure is valid for 5 years. The nurses are required to attend in continuous training courses supervised by the Ministry of Health and Medical Education and apply for reassessment. The court final decision of deprivation of medical profession will lead to dispense of registration/licensure. The certification council with professional supervision and training commission as well as nursing regulation institutions and the related institutions in the Department of Nursing, Ministry of Health and Medical Education are responsible for policy-making and decision-making on registration and licensure. Table 1 indicates the requirements of registration/licensure in different countries.

**Table 1: Comparison of requirements for registration/licensure in different countries**

Requirement Country	Registration/licensure assessment for clinical work						Requirement of registration/licensure reassessment				
	Degree	Specialized exam	Criminal clearance	physical health	mental health	English exam	Validity	Specialized exam	Criminal clearance	physical health	mental health
Iran	x	x	x	x	x	-	5 years	x	x	x	x
USA	x	x	x	x	x	Immigrants	Different in various states, often 5 years	x	x	x	x
Canada	x	x	x	x	x	Immigrants	Different in various states, often annually	x	x	x	x
UK	x	-	x	x	x	Immigrants	3 years Capability development plan	-	x	x	x
Australia	x	-	x	x	x	Immigrants	Annually Capability development plan	-	x	x	x
China	x	x	x	x	x	-	2	x	x	x	x
India	x	High school diploma	x	x	x	-	Different in various states, often permanent				
Mexico	x	Student final exam	x	x	x	-	Permanent validity as long as the applicant violates the law				
Philippines	x	x	x	x	x	Training in English	Permanent validity as long as the applicant violates the law				
Russia	x	-	-	-	-	-	Permanent validity as long as the applicant violates the law				
Peru	x	-	-	-	-	-	Permanent validity as long as the applicant violates the law				
Armenia	x	-	-	-	-	-	Permanent validity as long as the applicant violates the law				

## DISCUSSION

Increasing and changing health needs of society, increasing roles of nurses and persistent shortage of nursing staff [10] resulting in qualitative and quantitative increase in nursing training [1] have been followed by challenges such as recruitment of incompetent nurses for providing care [10]. Therefore, it is essential to assess ethical competence and professional competence of nurses to prevent potential damage to the society and ensure effective safe and dignity care [27, 7]. One course of registration/licensure is not enough until the end of career [6]. It is essential to ensure development of capabilities and skills of employees considering technological changes and scientific achievements, particularly in the area of health [9]. Hence, it is essential to review registration/licensure of nurses

periodically to provide the society with effective safe care [28]. Regulations of education, educational evaluation and registration/licensure of nurses are influenced by type of legislation, state laws and economic, political and cultural context of a country [18-20]. These regulations are not similar in two countries [15]; however, they all tend to preserve and promote health in the society [24, 25]. Nurses are always trying to provide the best care despite all shortcomings [2]. Iranian nurses are able to be creative and make positive changes [12]. Nursing registration/licensure has been followed by positive outcomes in different countries; therefore, it will be followed by positive outcomes for nursing profession and health system of Iran. Despite the lack of nursing staff, registration/licensure is useful to ensure professional competence of caregivers. Registration/licensure is a solution to achieve safe and dignity care and public protection [12]. In general, registration/licensure assessment will be followed by challenges which can be identified and eliminated by interaction of regulatory institutions, mutual empathy of employees, experts and institutions. Nursing registration/licensure is essential as a nursing regulation to ensure ethical and professional competence of caregivers to protect the society and promote quality of safe and dignity care.

### CONCLUSION

Registration/licensure promotes value, dignity and respect of patients and dignity and identity of nurses. Registration/licensure has been followed by positive outcomes for caregivers and care recipients in different countries; it will be followed by positive outcomes for nursing profession and health system of Iran. The most important outcomes of registration/licensure are the ensured professional, ethical and psychological competence of caregivers in providing the best quality care.

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### REFERENCES

- [1] Tate, E. T., Moody, K. The public good: Regulation of nursing students. *JONA'S healthcare law, ethics and regulation*. 2005;7(2):47-53.
- [2] Wolf, Z. R. Nursing practice breakdowns: good and bad nursing. *Medsurg Nursing*. 2012;21(1):16.
- [3] Chornick, N. APRN licensure versus APRN certification: What is the difference? *JONA'S healthcare law, ethics and regulation*. 2008;10(4):90-3.
- [4] Benefiel, D. The story of nurse licensure. *Nurse educator*. 2011;36(1):16-20.
- [5] Fealy, G.M., Carney, M., Drennan, J., Treacy, M., Burke, J., O'CONNELL, D.Y.M.P.N.A., Howley, B., Clancy, A., Mchugh, A., Patton, D. and Sheerin, F. Models of initial training and pathways to registration: a selective review of policy in professional regulation. *Journal of nursing management*. 2009;17(6), pp.730-738.
- [6] Philipsen, N. C., Lamm, N. H., Reier, S. L. Continuing competency for nursing licensure. *The Journal for Nurse Practitioners*. 2007;3(1):41-5.
- [7] Shalo, S. Protecting the Public from Bad Nurses. *AJN The American Journal of Nursing*. 2009;109(3):25-6.
- [8] Kugler, E. C., Burhans, L. D., George, J. L. Removal of legal barriers to the practice of advanced practice registered nurses. *North Carolina medical journal*. 2011;72(4):285.
- [9] Poe, L. Nursing regulation, the nurse licensure compact, and nurse administrators: Working together for patient safety. *Nursing administration quarterly*. 2008;32(4):267-72.
- [10] Zhong, E. H., Kenward, K., Sheets, V. R., Doherty, M.E., Gross, L. Original Research: Probation and Recidivism: Remediation Among Disciplined Nurses in Six States. *AJN The American Journal of Nursing*. 2009; 109(3):48-57.
- [11] Hudspeth, R. Understanding clinical nurse specialist regulation by the boards of nursing. *Clinical Nurse Specialist*. 2009; 23(5):270-5.
- [12] Benton, D. C. Nurses in Iran: A Force for Change. *Nursing and Midwifery Studies*. 2013;2(4):47-8.
- [13] Ministry of Health and Medical Education; Invitations to attend nursing rules and regulations; 2015.
- [14] Ministry of Health and Medical Education, Regulations Assessment of Professional Competence in Nursing, 2016.
- [15] Nichols, B. L., Davis, C. R., Richardson, D. R. International models of nursing. *The future of nursing: Leading change, advancing health*. 2010:565-639.
- [16] Brush, B. L. Global nurse migration today. *Journal of Nursing Scholarship*. 2008; 40(1):20-5.

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- [17] Meister, L., Heath, J., Andrews, J., Tingen, M. S. Professional nursing portfolios: a global perspective. *Medsurg Nursing*. 2002; 11(4):177.
- [18] Upton, P., Scurlock-Evans, L., Williamson, K., Rouse, J., Upton, D. The evidence-based practice profiles of academic and clinical staff involved in pre-registration nursing students' education: A cross sectional survey of US and UK staff. *Nurse Education Today*. 2015; 35(1):80-5.
- [19] ICN. The Role and Identity of the Regulator: An International Comparative Study. ICN regulation series, 2009.
- [20] WHO. Transforming and scaling up health professional education and training policy brief on regulation of health profession education. 2013.
- [21] Harbison, S. APRNs and multi-state licensure compacts. *Journal of Pediatric Health Care*. 2003; 17(6):321-3.
- [22] Ryan, F., Coughlan, M., Cronin, P. Step-by-step guide to critiquing research. Part 2: qualitative research. *British Journal of nursing*. 2007; 16(12):738-45.
- [23] Xu, Y. A comparison of regulatory standards for initial registration/licensure of internationally educated nurses in the United Kingdom, Australia, Canada, and the United States. *Journal of Nursing Regulation*. 2011;2(3):27-36.
- [24] Wearing, J., Nickerson, V. Establishing a regulatory framework for certified practices in British Columbia. *Journal of Nursing Regulation*. 2010;1(3):38-43.
- [25] Brownie, S. M., Hunter, L. H., Aqtash, S., Day, G.E. Establishing Policy Foundations and Regulatory Systems to Enhance Nursing Practice in the United Arab Emirates. *Policy, Politics, & Nursing Practice*. 2015;16(1-2):38-50.
- [26] Scanlon, A., Cashin, A., Watson, N., Bryce, J. Advanced nursing practice hours as part of endorsement requirements for nurse practitioners in Australia: A definitional conundrum. *Journal of the American Academy of Nurse Practitioners*. 2012;24(11):649-59.
- [27] Marrs, J. A., Alley, N. M. Moral turpitude: a benchmark toward eligibility for registered nurse licensure?. *JONA'S healthcare law, ethics and regulation*. 2004; 6(2), 54-59.
- [28] Clevette, A., Erbin-Roesemann, M., Kelly, C. Nursing licensure: An examination of the relationship between criminal convictions and disciplinary actions. *Journal of nursing law*. 2007;11(1):5-12.