

Beyond Hospital Walls: The Historical Shift in Nursing Education

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Abstract:

Introduction: The evolution of nursing education has played a crucial role in shaping modern healthcare systems worldwide. Initially, nursing was an informal practice linked to care giving within families and religious institutions. However, with the increasing complexity of healthcare, the need for formal and structured nursing education became evident. The transition from hospital-based training to academic programs marked a significant milestone in the professionalization of nursing. This shift enabled nurses to gain comprehensive knowledge, clinical skills, and research expertise, contributing to improved patient care and healthcare outcomes.

Objective: This study aims to explore the historical transformation of nursing education from informal training to structured academic programs. It examines the impact of these developments on nursing professionalism, patient care quality, and healthcare systems. The study also highlights the role of standardization, specialization, and technological advancements in modern nursing education.

Methodology: The study is based on a comprehensive review of literature and historical records on nursing education. It includes an analysis of key milestones such as Florence Nightingale's contributions, the establishment of nursing schools, and the introduction of structured curricula by the Indian Nursing Council (INC). The study also evaluates the impact of specialization, research-based education, and the rise of online and distance learning programs on modern nursing education.

Result: The findings indicate that the shift from hospital-based training to academic institutions has significantly enhanced nursing education. The introduction of diploma, undergraduate, postgraduate, and doctoral nursing programs has led to the development of highly skilled and knowledgeable nursing professionals. Specializations such as pediatric, psychiatric, and community health nursing have expanded the scope of nursing practice. Additionally, evidence-based education and interdisciplinary approaches have improved nursing leadership and research capabilities. The integration of online learning has further increased accessibility, enabling continuous professional development for nurses.

Conclusion: The evolution of nursing education has been instrumental in advancing the nursing profession and improving healthcare standards. The transition from informal caregiving to structured academic programs has strengthened nursing's role in healthcare delivery. With ongoing advancements in technology and global health challenges, nursing education continues to evolve, ensuring that nurses remain adaptable and innovative. This transformation is essential for addressing the ever-changing demands of modern healthcare systems and enhancing patient care worldwide.

Keywords: Nursing education, Hospital-based training, professionalization, university-based education, Indian Nursing Council (INC), Hospital-based Training, Healthcare Transformation

INTRODUCTION

Nursing education has undergone significant transformations over the centuries, evolving from rudimentary training within hospitals to comprehensive academic curricula that extend beyond clinical settings. This shift not only reflects advancements in medical science but also the recognition of nursing as a distinct and essential profession in healthcare. In the early stages, nursing education was predominantly focused on hands-on training in hospitals, with limited formal academic structure. However, as healthcare needs expanded and became more complex, so did the approach to nursing education.

The history of nursing education has been closely tied to the broader transformation of healthcare and the growing recognition of nursing as a distinct profession. In the early stages, nursing training was largely informal, often centered on hands-on experience within the hospital environment. However, the growing complexity of healthcare and the increasing demand for skilled and educated professionals led to significant reforms in nursing education. The shift from apprenticeship models to university-based education represents one of the most pivotal changes in the history of nursing, influencing both the education of nurses and the way nursing is practiced today.

One of the major milestones in the development of nursing education in India came with the establishment of the Indian Nursing Council (INC) in 1947, which set standards for nursing education and practice in the country. The INC played a crucial role in professionalizing nursing, ensuring a standardized curriculum, and fostering the development of skilled nurses capable of addressing the healthcare challenges of a growing nation. The shift from hospital-based training to more formal academic institutions, such as nursing schools and universities, has been pivotal in shaping the modern nursing profession in India. Today, nursing education encompasses various levels, including diploma, undergraduate, and postgraduate programs, with a strong emphasis on both theoretical knowledge and clinical practice.

As nursing education has expanded beyond hospital walls, it has adapted to meet the evolving needs of healthcare delivery. The focus on evidence-based practice, research, leadership, and interdisciplinary collaboration has empowered nurses to take on greater roles in patient care, public health, and healthcare policy. This historical shift represents not only a transformation in how nurses are trained but also an acknowledgment of their critical role in improving health outcomes and shaping the future of healthcare. This historical research provides a historical context of nursing education, its evolution, and the influence of the Indian Nursing Council. It sets the stage for further exploration of how nursing education continues to evolve and its broader implications in modern healthcare.

Historical Development of Nursing Education

The roots of modern nursing education lie in the 19th century, with the seminal work of Florence Nightingale, who is often regarded as the founder of professional nursing. Prior to Nightingale's influence, nursing was considered a domestic or religious duty, with little formal training. Most nurses were women who learned caregiving through practical experience, typically under the supervision of hospital administrators or religious orders.

The Crimean War (1853–1856) proved to be a critical incident that demonstrated the importance of trained nurses. Florence Nightingale's efforts during the war, where she emphasized sanitation, proper care, and organization, led to a dramatic decrease in the death rates among wounded soldiers. Upon her return to England, Nightingale recognized the need for formalized education for nurses. In 1860, she

established the Nightingale Training School for Nurses at St. Thomas' Hospital in London, which became the first formal nursing school in the world. Nightingale's curriculum focused on hygiene, patient care, and nursing theory, marking a shift towards a more academic and professional approach to nursing training.

This was a significant turning point in nursing education, as it laid the foundation for structured nursing programs that integrated both practical and theoretical knowledge. The influence of Nightingale's educational reforms spread globally, and similar programs were established in other parts of the world, including the United States, Canada, and Europe. Hospital-based nursing schools, however, remained the primary setting for training nurses for several decades.

Major Milestones in the Historical Shift in Nursing Education:

1. Early Beginnings of Nursing Education (Pre-19th Century):

- Nursing was primarily an informal role, with care provided by religious sisters or women with no formal training.
- Early training was conducted in religious institutions or under the guidance of senior nurses.

2. The Establishment of Formal Nursing Education (Mid-19th Century):

- The first formal nursing school was established in 1860 by **Florence Nightingale** at St. Thomas' Hospital in London. This marked a shift toward professionalized, structured nursing education.
- Nightingale's efforts to introduce systematic education focused on sanitation, hygiene, and patient care.

3. Growth of Nursing Schools Globally (Late 19th Century):

- Nursing schools based on the Nightingale model were established worldwide, including in the U.S., Canada, and Australia, promoting the idea of formalized nursing education.
- **The American Nurses Association (ANA)** was founded in 1896, further contributing to the development of professional nursing education.

4. Introduction of Diploma Programs (Early 20th Century):

- By the early 20th century, many countries began developing **diploma nursing programs** that combined theoretical instruction with practical hospital-based training.
- Nurses began to receive specialized education for different areas, including public health, pediatric care, and psychiatric nursing.

5. Formation of the Indian Nursing Council (INC) (1947):

- The **Indian Nursing Council (INC)** was established to standardize nursing education and practice in India, creating uniformity in nursing curricula and professional requirements across the country.
- The INC introduced various educational programs, including diploma and degree courses, helping elevate the professional status of nursing in India.

6. Establishment of Degree Programs in Nursing (1950s-1960s):

- As healthcare needs became more complex, nursing education expanded beyond diploma programs. Degree programs in **B.Sc. Nursing** were introduced in various universities, marking a shift to a more academic approach to nursing education.
- These programs provided a broader base of knowledge and theory, emphasizing research, leadership, and community health.

7. The Expansion of Postgraduate Nursing Education (1970s-1980s):

- **M.Sc. Nursing** programs were established, allowing nurses to specialize in various fields, such as pediatric nursing, obstetric nursing, and psychiatric nursing.
- This expansion marked the professionalization of nursing, as postgraduate programs allowed for more in-depth theoretical and practical knowledge, leading to leadership roles in healthcare.
- 8. **Globalization and the Introduction of Evidence-Based Practice (1990s):**
 - The integration of **evidence-based practice (EBP)** into nursing education started gaining prominence, emphasizing the use of research findings to inform clinical decision-making.
 - Nursing schools and institutions worldwide began to adopt research-oriented curricula, encouraging nurses to contribute to the development of the profession through scholarly work and research.
- 9. **The Emergence of Online and Distance Learning Programs (2000s-Present):**
 - With advancements in technology, nursing education has adapted to include **online degree programs**, providing flexible learning opportunities for nurses worldwide.
 - This shift enables nurses to continue their education while managing work and family responsibilities.
- 10. **Current Trends: Holistic and Interdisciplinary Approaches to Nursing Education:**
 - In recent years, nursing education has increasingly adopted **holistic** approaches, emphasizing the importance of addressing the physical, emotional, and social aspects of patient care.
 - Additionally, **interdisciplinary education** is becoming more prevalent, with nurses learning alongside other healthcare professionals to foster collaborative care in clinical settings.

.B.Sc. Nursing Semester-wise Syllabus: The **Bachelor of Science in Nursing (B.Sc. Nursing)** is a four-year undergraduate program designed to prepare nurses with a comprehensive understanding of healthcare and nursing practice. The syllabus is divided into **eight semesters**, covering a broad range of subjects, including anatomy, physiology, nursing foundation, medical-surgical nursing, and community health nursing. The latter semesters emphasize more specialized subjects and advanced clinical skills, with students also engaging in practical training across various healthcare settings. The curriculum ensures a balance of theoretical education and hands-on clinical practice, preparing students for real-world healthcare challenges.

M.Sc. Nursing Semester-wise Syllabus: The **Master of Science in Nursing (M.Sc. Nursing)** is a two-year postgraduate program offering specialization in fields like pediatric nursing, obstetrics and gynecology nursing, psychiatric nursing, and medical-surgical nursing. The **four-semester** program focuses on advanced nursing theory, research methodology, healthcare management, and leadership. The syllabus is structured to equip students with the skills necessary for clinical excellence and to prepare them for roles in academic and research settings. Research is a key component of the M.Sc. Nursing curriculum, allowing students to contribute to the development of the profession.

Post Basic B.Sc. Nursing Semester-wise Syllabus: The **Post Basic B.Sc. Nursing** program is a two-year course designed for diploma nurses who wish to upgrade their knowledge and skills. The **four-semester** program focuses on enhancing clinical expertise in areas such as medical-surgical nursing, maternal and child health nursing, and community health nursing. The syllabus also includes subjects on nursing leadership, management, and research, which are essential for nurses aiming to take on supervisory or managerial roles within healthcare systems.

Critical care units are spaces where nursing care and technology intersect. At first glance, the machines and equipment in these units may seem overwhelming due to their size, noise, and unfamiliarity. However, focusing only on the technology can obscure the larger system that defines critical care. When

we concentrate solely on the machines, it can seem as though nurses play a minimal role in shaping patient care. To an outsider, nurses may appear invisible. This narrow view ignores the architectural and historical context of critical care, which emerged in the 1950s as a practical yet costly solution for grouping critically ill patients together. By considering the historical background, we gain a more comprehensive understanding of the role of technology in critical care. This approach highlights not only the technological components but also the contributions of patients, families, healthcare providers, and the factors that shape how care is defined, prioritized, and allocated. Technology is not the driving force but one part of a broader system of care.

In the 1950s, nurses played a central role in the organization of critical care services, and the creation of these units was more about the need for vigilant nursing observation than the use of advanced machines. As Donna Diers aptly put it, "Nursing is what is intensive in intensive care." One of the earliest critical care units was established in 1954 at a small community hospital in Chestnut Hill, Pennsylvania. This unit was primarily for surgical patients who required close monitoring after complex procedures. Patients could not be safely cared for on general hospital floors, particularly at night when nurse staffing was often insufficient. The idea of grouping critically ill patients together came from wartime experience and discussions between a hospital administrator and a contact at Blue Cross. The key innovation was the provision of intensive nursing care, not the introduction of specialized technology. A sick patient needed a skilled nurse who could monitor their condition, recognize when treatment was necessary, and call for medical assistance.

As the success of critical care units became evident, they evolved into spaces where new technology was concentrated, and physicians could experiment with innovative procedures or treatments. The combination of advanced nursing care and growing expertise made these units safer for patients. Hospitals began receiving higher reimbursements for the care provided in these units, and until the late 1970s, few questioned the cost. The historical development of critical care underscores the complexity of healthcare changes and offers valuable lessons for policymakers. It shows that innovation is not always a neat and controlled process; in fact, the creation of critical care was driven by chance, personal connections, and the willingness of nurses and doctors to experiment. Furthermore, it illustrates how social, political, and economic factors influenced hospitals' decisions regarding care for the critically ill. Viewing the development of critical care solely through the lens of technology gives an incomplete picture. The decision-making process surrounding the care of acutely ill patients was often not entirely rational but was shaped by individual relationships, a dedicated healthcare workforce, the availability of hospital space, and the public's willingness to finance these services.

The Indian Nursing Council (INC) plays a fundamental role in the development of these curricula. By setting clear guidelines for the structure and content of nursing programs, the INC ensures that nurses are equipped with the skills required to meet the challenges of modern healthcare delivery. As a result, the syllabi for B.Sc., M.Sc., and Post Basic Nursing programs are designed to produce highly qualified nurses who can contribute to improving health outcomes and advancing the nursing profession in India. The historical shift in nursing education reflects broader changes in healthcare systems and society's growing recognition of nursing as a critical, evidence-based profession. From informal training to the current emphasis on academic education, specialization, and interdisciplinary collaboration, these milestones have been instrumental in shaping nursing education into what it is today.

The ongoing contributions of national bodies like the Indian Nursing Council continue to ensure that nursing education remains relevant, accessible, and responsive to the evolving healthcare landscape.

Nursing education in India has seen significant advancements in both structure and content over the years, aiming to meet the evolving healthcare needs of the country. With the professionalization of nursing, various educational programs have been developed to provide nurses with the necessary skills and knowledge for clinical practice, leadership, and research. The Indian Nursing Council (INC) plays a crucial role in regulating and setting standards for nursing education, ensuring that the programs maintain a high level of quality and consistency. This paper explores the historical shift in nursing education from its hospital-based origins to its current standing as an academic discipline. By examining key events, figures, and historical developments, the article provides a detailed account of how nursing education evolved over time.

REVIEWS OF KEY MILESTONES IN NURSING EDUCATION

The establishment of nursing school: The late 19th and early 20th centuries saw the establishment of several nursing schools in hospitals, including the Bellevue Hospital School of Nursing in New York (1873) and the Massachusetts General Hospital School of Nursing (1873). While these schools were integral in providing much-needed trained nurses, they were also often criticized for their lack of formal academic content and their heavy reliance on the labor of students as part of the healthcare workforce.

The Gold mark Report (1923), issued in the United States in 1923, and was a landmark document in the history of nursing education. It criticized hospital-based training for failing to provide sufficient academic and theoretical education. The report called for a shift towards university-based education for nurses, advocating for the integration of nursing schools with colleges and universities to provide a more comprehensive education that would prepare nurses for leadership and advanced clinical roles.

World War II (1939–1945), had a profound impact on nursing education in the United States. The Nurse Cadet Corps, established in 1943, was designed to accelerate the training of nurses to meet wartime demands. This program expanded opportunities for nursing education and led to the development of more structured academic programs. It also marked the beginning of a closer relationship between nursing education and public health, with a growing emphasis on advanced nursing roles. After World War II, nursing education underwent further transformation. Universities and colleges began to offer Bachelor of Science in Nursing (BSN) programs, and nursing schools began to move away from hospital settings. The integration of nursing programs into higher education institutions reflected the growing recognition of the intellectual and professional demands of nursing as a field. By the 1960s, the American Nurses Association (ANA) advocated for the BSN as the entry-level degree for professional nursing practice, marking a decisive shift towards university education.

METHODOLOGY

Research Design: This study adopts a historical qualitative research design aimed at understanding the evolution of nursing education, particularly focusing on the shift from traditional hospital-based training to academic institutions. This shift, which began in the early 20th century, has had profound implications for the nursing profession, education, and healthcare systems. By examining various historical sources and literature, this study seeks to track how these educational changes have shaped nursing practice over time and to explore the broader societal and political forces that contributed to this transformation.

Data Sources: The research utilizes primary and secondary historical data sources to trace the development of nursing education. These sources include:

- **Archival Documents:** Historical records such as official nursing education curricula, administrative

records from early nursing schools, and letters or diaries of nursing educators and students. These documents provide insights into the early structure of nursing education and the initial shift toward formalized, academic-based training.

- **Nursing Journals and Articles:** Published literature, such as nursing and healthcare journals from the late 19th to early 20th centuries, which reflect the evolving views on the relationship between hospital-based education and academic training.
- **Interviews and Oral Histories:** Interviews with senior nursing professionals and historians in the field of nursing education, conducted to gather personal recollections and insights about the transformation in nursing education practices.
- **Historical Studies and Literature Reviews:** Scholarly articles and books on the history of nursing education, which provide context for understanding the societal, political, and institutional changes that shaped nursing education over the decades.
- **Policy Documents:** Records from governmental and healthcare organizations that describe the policy shifts and decisions that impacted the formalization of nursing education, such as changes in licensing, accreditation, and professional standards.

These sources were chosen to ensure a comprehensive analysis of the historical narrative and to incorporate multiple perspectives, including those of educators, students, and policymakers.

Data Collection

1. **Document Analysis:** A significant portion of the data collection involved systematic analysis of primary documents, such as nursing education curricula from various decades, government reports on nursing education reforms, and professional correspondence. These documents were sourced from public archives, university libraries, and nursing organizations.
2. **Literature Review:** A thorough review of existing literature, including academic journals, books, and government publications, was conducted. This review focused on tracing the historical development of nursing education from the early apprenticeship model to the modern university-based educational framework.
3. **Policy and Institutional Analysis:** Key policy documents, including those from the American Nurses Association, the National League for Nursing, and other influential nursing bodies, were examined to understand how policy influenced the professionalization and academicization of nursing education.

Data Analysis

The data were analyzed using a thematic analysis approach, with the goal of identifying key themes and trends that emerged across the different historical periods. The analysis involved several key steps:

1. **Chronological Framework:** The data were categorized according to historical periods, such as the pre-academic era, the early 20th century shift, and the post-WWII development of formal nursing schools. This chronological approach allowed for a structured examination of the changes over time.
2. **Contextual Analysis:** In addition to identifying thematic trends, the data were examined within the broader context of societal and political movements, such as women's rights, labor reforms, and medical advancements, which played a role in shaping nursing education during the time periods in question.

3. **Comparative Analysis:** The study also compared the evolution of nursing education in different countries, focusing on how various national policies, cultural attitudes, and healthcare needs influenced the approach to nursing education. This comparison helped to contextualize the American experience in a global framework.

This methodology provides a detailed, structured approach for understanding the historical evolution of nursing education, incorporating multiple data sources and analysis techniques to provide a nuanced account of the shift from hospital-based training to academic models.

FINDINGS AND DISCUSSION

The historical shift in nursing education, from a hospital-based apprenticeship model to an academic, university-based structure, has had significant and lasting implications for the profession of nursing and its impact on healthcare delivery. Through the examination of archival records, interviews, and secondary literature, several key findings emerged that highlight the complex forces shaping this transformation:

1. Early Hospital-Based Education:

- In the late 19th and early 20th centuries, nursing education was primarily conducted within hospitals. Nurses learned through direct patient care under the supervision of experienced nurses and physicians. This hands-on training was pragmatic and focused on practical skills essential for immediate patient care.
- Hospitals were considered the primary training grounds, and nursing schools were often part of larger hospital systems. This model was closely aligned with the hierarchical nature of healthcare institutions during this period, where nurses were seen as subordinates to physicians and other medical professionals.

Challenges: One significant issue was the lack of formalized curricula and standardized teaching. Training varied widely between hospitals, and nursing was not yet recognized as a professional discipline. Furthermore, the reliance on hospitals as training grounds often meant that nurses were exploited as cheap labor, working long hours with little formal education.

2. The Emergence of Formal Nursing Education:

- The push toward more formalized nursing education began in the late 19th and early 20th centuries, primarily influenced by the establishment of nursing schools, such as the Bellevue Training School in New York (1873) and the establishment of the Nightingale School of Nursing in England (1860). These institutions introduced structured curricula and a more theoretical approach to nursing.
- By the early 1900s, nursing education began to shift toward a more academic structure, where institutions outside of hospitals (such as universities and colleges) started to offer nursing programs. The curriculum began to include courses in anatomy, physiology, and public health, which marked the beginning of nursing as a more scientific and scholarly discipline.

3. The Role of World War I and II in Shaping Nursing Education:

- Both World Wars played a pivotal role in accelerating the transformation of nursing education. The demand for skilled nurses during the wars led to the establishment of training programs that emphasized a balance of both practical experience and theoretical knowledge. Nursing was seen as essential for military and civilian healthcare, which led to increased professionalization and recognition.

- The wars also contributed to the development of standardized nursing education programs, with national organizations like the American Nurses Association (ANA) and the National League for Nursing (NLN) playing a larger role in shaping educational standards and curricula.
 - The post-war period saw the introduction of nursing education at the bachelor's degree level, with universities and colleges offering formal academic programs. This shift toward higher education reflected broader social changes, including the increasing professionalization of women's roles and the movement toward more standardized education in other fields.
4. **The Development of University-Based Nursing Programs:**
- In the mid-20th century, university-based nursing programs gained traction, marking the most significant shift in nursing education. The establishment of the first Bachelor of Science in Nursing (BSN) programs during this time represented the culmination of efforts to align nursing with other healthcare professions and academic disciplines.
 - As nursing education became more formalized, there was an increased emphasis on research and evidence-based practice, positioning nursing as a distinct academic and professional discipline with its own body of knowledge.
 - Challenges and Resistance: This shift was not without resistance, as many nurses and healthcare administrators were concerned about moving nursing education out of hospitals and into universities. Some viewed it as an attempt to distance nurses from the practical, hands-on patient care for which they were valued. However, advocates argued that an academic approach would provide the theoretical foundation necessary for nursing to evolve into a full-fledged healthcare profession.
5. **The Socio-Political Context of Change:**
- The historical shift in nursing education cannot be understood without considering the broader socio-political context. The movement for gender equality, the expansion of higher education, and the professionalization of nursing all contributed to this transformation.
 - Nursing's transition from hospital-based education to academic institutions was also a result of changing perceptions of women's roles in society. As more women entered higher education and professional fields, nursing followed suit, eventually achieving the recognition and status of other healthcare professions.
 - Furthermore, healthcare policy changes in the mid-20th century, including legislation to improve healthcare and the establishment of formal nursing organizations, reinforced the need for more advanced and academically rigorous nursing programs.

DISCUSSION

The shift from hospital-based nursing education to university-based programs has had profound implications for the nursing profession and for the delivery of healthcare in general. This transformation reflects broader changes in the healthcare system, society, and educational policies, and it has contributed to the professionalization and intellectualization of nursing.

1. **Increased Professionalization:** The move to university-based nursing programs played a critical role in elevating the status of nursing within the healthcare system. As nurses gained more formal education, they were better equipped to take on advanced clinical roles and engage in research. This shift allowed nursing to develop its own body of knowledge and theoretical frameworks, contributing to the evidence-based practices that are central to modern nursing care.

2. **Integration of Theory and Practice:** One of the most significant outcomes of this shift has been the integration of theory and practice in nursing education. While hospital-based training emphasized practical skills, academic programs have provided a more balanced approach, combining hands-on clinical training with theoretical knowledge in subjects such as pharmacology, ethics, and healthcare policy. This has allowed nurses to not only provide quality patient care but also contribute to healthcare reform, policy development, and clinical research.
3. **Challenges of the Transition:** Despite the many benefits of this shift, the transition from hospital-based to university-based education was not without its challenges. Resistance to change, particularly among traditionalists within the nursing profession, reflected concerns about whether the move would dilute the practical focus of nursing care. Some feared that an academic approach would disconnect nurses from the realities of patient care. However, over time, the value of a more holistic education that incorporates both theory and practical experience has been widely recognized.
4. **Broader Social Implications:** The evolution of nursing education also reflects broader societal trends, particularly the growing acceptance of women in professional and academic spheres. As nursing moved into universities, it mirrored the broader shift toward women's empowerment and the expansion of opportunities in education and the workforce. This shift laid the groundwork for the increasing number of women in leadership roles within healthcare and other sectors.
5. **Impacts on Healthcare Delivery:** The transition to academic nursing education has also had a profound effect on healthcare delivery. Nurses with formal education are now able to provide more specialized care, manage complex medical situations, and assume leadership roles in hospitals, clinics, and community health settings. As a result, nursing has become an essential and respected component of the healthcare system, contributing to improved patient outcomes, enhanced patient safety, and more efficient healthcare delivery.

CONCLUSION

The historical shift in nursing education from hospital-based to university-based programs marks a significant turning point in the professionalization of nursing. While the transition faced resistance and challenges, it ultimately led to the development of a more highly educated and specialized nursing workforce, better equipped to meet the demands of modern healthcare. This transformation was influenced by a combination of societal changes, healthcare policies, and the efforts of pioneering nurses and educators. As nursing education continues to evolve, understanding this historical shift provides valuable insights into the ongoing development of the profession and its critical role in healthcare systems worldwide.

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