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Post-Basic Nursing: Specialisation or Specialty? A Concept Analysis

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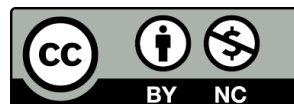
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ABSTRACT

Background: Post-basic nursing education is crucial for enhancing clinical competencies. Despite its longstanding implementation in Malaysia and globally, uncertainty remains whether post-basic nursing should be conceptualized as specialisation (*pengkhususan*) or specialty (*kepakaran*). This conceptual ambiguity contributes to inconsistencies in nursing education, professional credentialing, career progression, and policy development. This conceptual ambiguity creates inconsistencies in education, credentialing, and policy.

Methods: Using Walker and Avant's framework, this concept analysis examined post-basic nursing through a narrative literature review of 21 sources.

Results: The analysis demonstrated that post-basic nursing is characterized primarily by focused clinical competency development, practice-oriented education, and service-driven training, aligning it closely with specialisation. In contrast, specialty encompasses broader professional attributes, including advanced theoretical knowledge, research capability, evidence-based practice, leadership, autonomous clinical decision-making, and scholarly contribution. Although many international frameworks increasingly link specialty practice with postgraduate education, regulatory requirements differ across nations; some healthcare systems continue to recognize specialty through structured post-registration certification and extensive clinical experience rather than graduate degrees alone. Within the Malaysian context, findings indicate that post-basic nursing aligns with clinical specialisation, whereas postgraduate education provides the primary pathway for acquiring advanced disciplinary knowledge and scholarly expertise in accordance with the Malaysian Qualifications Framework.

Conclusion: Clarifying these concepts supports more cohesive educational pathways, professional credentialing, workforce planning, and career advancement, ultimately strengthening nursing as both a clinical profession and a scholarly discipline.

Keywords: Post-basic nursing; Specialisation; Specialty nursing practice; Concept analysis; Advanced nursing practice; Nursing education

INTRODUCTION

Globally, nursing education and professional practice have advanced more quickly due to the growing complexity of healthcare systems. In addition to providing safe and competent patient care, modern nurses are expected to exhibit sophisticated clinical thinking, leadership, evidence-based practice, research competence, and professional autonomy. In order to meet the evolving demands of healthcare systems, nursing education has gradually moved from hospital-based vocational training to university-based programs that promote higher-order thinking, scholarly inquiry, interdisciplinary collaboration, and professional leadership (1,2).

In Malaysia and many other healthcare systems, post-basic nursing programmes have long served as an important mechanism for strengthening nurses' competencies in focused clinical areas such as emergency nursing, critical care, renal nursing, perioperative nursing, neonatal nursing, midwifery and community health nursing. These programmes contribute significantly to workforce development by preparing nurses with specialised clinical knowledge and technical competencies required to meet increasing healthcare demands. As nursing roles continue to expand, educational institutions and healthcare organisations are also recognising the need for differentiated career pathways that support continuing professional development and specialised practice (3,4).

Despite these developments, uncertainty remains regarding the conceptual position of post-basic nursing within professional nursing development. Terms such as *post-basic nursing*, *specialisation*, *specialty nursing*, *advanced practice nursing*, and *expert nursing* are frequently used interchangeably despite representing different levels of educational preparation, professional responsibility, and clinical expertise. This conceptual ambiguity contributes to inconsistencies in educational pathways, professional credentialing, workforce planning, policy development, and career progression. Furthermore, differing educational models and regulatory frameworks across countries have resulted in varying interpretations of specialty nursing, making conceptual clarification increasingly important for nursing education and professional practice (4,5).

In the Malaysian context, the term *pengkhususan* refers to post-basic nursing education that cultivates specialised clinical skills for particular practice areas, while *kepakaran* signifies a superior level of professional proficiency linked to postgraduate education, advanced clinical reasoning, academic research, leadership, and broader professional duties. While these phrases are often utilised synonymously in practice, they may signify distinct educational and professional frameworks that warrant conceptual elucidation. The Malaysian Qualifications Agency (MQA) differentiates competency-oriented professional training from postgraduate academic achievement via the Malaysian Qualifications Framework (MQF), which delineates ascending tiers of knowledge, research proficiency, and professional skill (6).

Walker and Avant emphasised that concept analysis is particularly valuable when concepts are used inconsistently or when their meanings overlap across professional contexts (7). Clarifying concepts enables educators, practitioners, researchers, and policymakers to develop shared understandings that improve communication, curriculum development, professional recognition, and healthcare policy. Therefore, concept analysis provides an appropriate methodological approach for examining the conceptual relationship between post-basic nursing, specialisation, and specialty nursing practice.

Specialisation primarily focuses on the “how” of nursing practice through the development of specific clinical competencies, procedural proficiency, and technical skills required to meet immediate healthcare service needs. In contrast, specialty nursing practice emphasises the “why” of nursing care by integrating advanced theoretical knowledge, evidence-based practice, research utilisation, leadership, critical thinking, and professional autonomy that underpin complex clinical decision-making (8). Accordingly, the distinction between specialisation and specialty practice extends beyond technical skill acquisition to encompass the depth of academic preparation, scope of professional responsibility, scholarly contribution, research capability, and autonomous clinical decision-making.

Internationally, specialty nursing practice is increasingly associated with postgraduate education and advanced professional preparation. The International Council of Nurses (ICN) describes advanced nursing

practice as requiring expert knowledge, complex decision-making abilities, and competencies that are shaped by the context and scope of practice within individual countries (9). Similarly, contemporary healthcare systems increasingly require health professionals who are capable of integrating scientific knowledge, research evidence, systems thinking, and leadership to improve healthcare quality and patient outcomes (10). The World Health Organization further emphasises that strengthening nursing education and leadership is fundamental to achieving sustainable health systems and improving global health outcomes (11).

Conceptual clarification also has important implications for nursing theory development and professional identity. Clear conceptual definitions strengthen theoretical understanding, facilitate curriculum development, and support consistency in educational and professional standards (12). Nevertheless, international literature also recognises that educational pathways and regulatory requirements for specialty nurses vary across countries. While many healthcare systems increasingly associate specialty nursing with postgraduate education, others recognise specialty nurses through structured post-registration certification, competency assessment, and extensive clinical experience (13). These distinctions imply that specialisation and speciality might be more accurately perceived as occurring on a continuum of professional growth rather than as entirely distinct classifications.

In the Malaysian higher education system, postgraduate studies serve as the primary pathway for cultivating advanced disciplinary knowledge and academic proficiency. The Malaysian Qualifications Agency stipulates that a Master's Degree, whether obtained by Coursework, Mixed-mode, or Research (MQF Level 7), necessitates that graduates exhibit advanced knowledge, critical comprehension, and autonomous research skills in a specific domain. Similarly, a Doctoral Degree (MQF Level 8) necessitates that graduates produce original information, exhibit independent research proficiency, and achieve mastery at the cutting edge of the field (14). As a result, nurses who obtain Master's or Doctoral degrees in specialist areas like emergency nursing, critical care nursing, community health nursing, renal nursing, or oncology nursing gain expert knowledge and academic proficiency in those domains. Nonetheless,

academic specialisation must be differentiated from specialised clinical practice, which may also include enhanced clinical proficiency, professional accreditation, and regulatory recognition.

Continuous curriculum development and lifelong professional learning are also essential to ensure that specialised nursing education remains responsive to evolving healthcare needs (15,16). Furthermore, increasing healthcare complexity has prompted calls for greater subspecialisation within nursing disciplines and stronger professional identity among specialist nurses to meet emerging patient care needs (17-19). Recent global research has underscored the necessity of distinguishing specialised nursing roles from advanced nursing practice roles in order to enhance workforce efficiency, role definition, and professional growth that correspond to the speciality (20,21).

Given these conceptual inconsistencies, together with variations in educational preparation, professional regulation, and international nursing frameworks, there is a need to clarify whether post-basic nursing should be conceptualised as *pengkhususan* (specialisation) or *kepakaran* (specialty). Clarifying this distinction is essential for strengthening nursing education, credentialing systems, career pathways, workforce planning, and professional recognition. Therefore, this paper employs Walker and Avant's concept analysis framework to examine the defining characteristics of post-basic nursing and clarify its conceptual position within contemporary nursing education and professional practice (7).

Aim and Uses of the Concept

This concept analysis aims to determine whether post-basic nursing more closely reflects the characteristics of clinical *pengkhususan* (specialisation) or *kepakaran* (specialty) using Walker and Avant's concept analysis framework (7). Clarifying this distinction is important because inconsistent use of these concepts may influence educational planning, professional recognition, credentialing systems, workforce development, and career progression within nursing.

This analysis may clarify educational routes and connect nursing education with the Malaysian Qualifications Framework while meeting worldwide nursing standards (1,2,6).

Clearer conceptual understanding may improve professional identity, curriculum development, and nursing policy, education, and workforce planning.

METHODS

This concept analysis followed the eight-step framework proposed by Walker and Avant (7). This framework was selected because it provides a highly systematic and widely accepted approach for examining conceptual meaning, identifying defining attributes, and distinguishing closely related concepts within nursing and healthcare literature.

To inform the analysis, a narrative literature search was undertaken using PubMed, Scopus, CINAHL, and Google Scholar. The search strategy utilized combinations of the following keywords: post-basic nursing, specialisation, specialty nursing, advanced nursing practice, clinical competency, professional development, and nursing education. Literature published in English between 2000 and 2026 was considered to capture contemporary shifts in both global nursing education and professional standards.

Following the initial search and the removal of duplicate publications, the literature underwent title and abstract screening. Peer-reviewed journal articles, international policy documents, regulatory publications, and higher education frameworks (such as those from the MQA, ACCN, and ICN) were included if they explicitly discussed conceptual definitions, educational preparation, competency development, or specialty nursing practice. Literature was excluded if it was strictly clinical or unrelated to nursing professional development (e.g., purely clinical research, pharmacological trials, or procedural guidelines that did not address educational frameworks or role transitions).

Following a comprehensive full-text review against these criteria, a final total of 21 sources were retained for the conceptual synthesis. In this comparative analysis, post-basic nursing served as the central concept, while specialisation (*pengkhususan*) and specialty (*kepakaran*) were examined comparatively to clarify the conceptual position of post-basic nursing within contemporary nursing education and professional practice.

RESULT

The analysis identified defining attributes, antecedents, consequences, empirical referents, and illustrative cases distinguishing post-basic specialisation from specialty (*kepakaran*). Consistent characteristics across the literature were retained as defining attributes, while inconsistent or conceptually irrelevant traits were excluded (7). The following session explains details of the findings of this study.

Defining Attributes

Walker and Avant described defining attributes as the characteristics that appear repeatedly in the literature and distinguish one concept from another (7). The present analysis identified two related but conceptually distinct sets of defining attributes.

Attributes of Specialisation (*Pengkhususan*)

Specialisation is characterised by:

- Focused clinical competency development;
- Practice-oriented and service-driven education;
- Enhancement of technical and procedural skills;
- Preparation for specific clinical settings;
- Competency-based educational outcomes; and
- Certification or advanced diploma qualification pathways.

The primary purpose of specialisation is to strengthen nurses' ability to function competently within specialised clinical environments. Educational programmes are primarily designed to meet workforce demands by enhancing technical competence and procedural proficiency required within designated clinical services (3,4). Competency is generally developed through structured post-registration education together with continuing clinical experience, consistent with Benner's description of expertise developing progressively through experiential learning (5).

Attributes of Specialty (*Kepakaran*)

Specialty demonstrates broader academic and professional characteristics, including:

- Advanced and integrated theoretical knowledge;

- Higher-order clinical reasoning and judgement;
- Evidence-based practice and research utilisation;
- Leadership and policy involvement;
- Greater professional autonomy;
- Interdisciplinary collaboration;
- Scholarly contribution and knowledge generation; and
- Postgraduate academic preparation.

Unlike specialisation, specialty integrates advanced clinical expertise with leadership, research capability, evidence-based practice, and autonomous decision-making. International nursing frameworks increasingly associate specialty with graduate-level preparation because these roles require complex clinical judgement, scholarly inquiry, leadership, and systems thinking (1,2,8,9).

Globally, regulatory requirements remain variable. While many healthcare systems associate specialty strictly with postgraduate education, others recognize it through post-registration certification and extensive experience (9,13,20). This suggests a continuum of professional development rather than mutually exclusive categories.

Overall, these defining attributes suggest that post-basic nursing aligns more closely with clinical specialisation (*pengkhususan*), whereas specialty (*kepakaran*) reflects a broader level of professional development that incorporates advanced scholarship, leadership, research capability, and autonomous clinical practice.

Model, Borderline and Contrary Cases

Walker and Avant recommended the use of model, borderline, and contrary cases to illustrate how defining attributes are present or absent within a concept (7). The following cases demonstrate the conceptual distinctions identified in this analysis.

Model Case: Specialisation

A registered nurse completes a six-month post-basic emergency nursing programme and develops advanced competencies in trauma assessment, triage, cardiac monitoring, and resuscitation procedures. The nurse functions effectively within the emergency department and demonstrates strong technical and procedural competence while providing safe and efficient emergency care. However, the role remains primarily practice-focused and

protocol-driven, with limited involvement in research, leadership, healthcare policy, or scholarly activities.

This case represents specialisation (*pengkhususan*) because it demonstrates focused clinical competency development within a defined area of practice without encompassing the broader scholarly and professional characteristics associated with specialty.

Borderline Case: Specialty

A registered nurse has worked continuously in an emergency department for several years and has developed a high level of clinical competence through extensive clinical experience, consistent with Benner's Novice to Expert model (5). During this period, the nurse pursues postgraduate education through one of two pathways.

In the first pathway, the nurse completes a Master's degree by Coursework in Emergency Care Nursing, which includes advanced pathophysiology, advanced pharmacology, advanced health assessment, research methodology, evidence-based practice, and healthcare leadership (1). This programme develops advanced clinical knowledge, clinical reasoning, leadership capability, and the ability to manage patients with complex healthcare needs.

In the second pathway, the nurse completes a Master's degree by Research, followed by a Doctoral degree by Research, with both research programmes focusing on emergency care nursing. Consistent with the Malaysian Qualifications Framework (MQF), the postgraduate research pathway enables the nurse to develop advanced disciplinary knowledge, independent research capability, critical inquiry, and scholarly expertise within a specialised field of nursing (6). Through research and scholarly activities, the nurse contributes to knowledge generation, evidence-based practice, quality improvement initiatives, and clinical guideline development.

Within healthcare institutions, clinical roles are primarily dictated by institutional policies, workforce requirements, and service needs rather than academic credentials. Consequently, nurses holding Master's or Doctoral degrees frequently perform the same bedside responsibilities and technical procedures as colleagues with post-basic

qualifications. Unlike midwifery, where recognised education confers a legally expanded scope of professional practice, emergency and critical care nurses commonly share similar clinical duties regardless of their specific certification status.

Nevertheless, beyond direct patient care, this nurse also mentors junior staff, leads quality improvement initiatives, translates research findings into clinical practice, and influences healthcare policy. These activities demonstrate the integration of advanced theoretical knowledge, research capability, leadership, evidence-informed practice, and professional autonomy, all of which are widely recognised characteristics of specialty (8,9,20).

This scenario represents a borderline case; although the nurse exhibits the defining attributes of *kepakaran* (advanced academic preparation, scholarly expertise, and leadership) (8,9,20), they lack formal regulatory recognition as a specialty nurse, which remains dependent on variable national credentialing systems (9,20). Ultimately, this case highlights that “specialty” is distinguished not merely by technical competence, but by the integration of advanced disciplinary knowledge and scholarly contribution.

Contrary Case

A newly graduated registered nurse (with less than three years of clinical experience) working in an emergency department possesses only entry-level nursing education, having not undertaken any post-basic education, specialty certification, postgraduate study, or advanced clinical training. The nurse provides routine care under the supervision of senior staff, performing responsibilities strictly consistent with the entry-level scope of professional practice. Furthermore, the nurse has limited involvement in complex clinical decision-making, leadership, research activities, policy development, or advanced evidence-based practice.

This scenario demonstrates neither clinical *pengkhususan* (specialisation) nor specialty (*kepakaran*), as none of the defining attributes identified in this concept analysis are present.

Antecedents and Consequences

Antecedents are events or conditions that must exist before a concept can occur, whereas consequences are outcomes that result from the occurrence of the concept (7).

The analysis identified several antecedents associated with post-basic specialisation, including:

- Increasing healthcare complexity;
- Workforce shortages within specialised clinical services;
- Growing demand for focused clinical competency;
- Organisational requirements for technically skilled nurses; and
- Expansion of specialised healthcare services (2,10,11).

These antecedents have contributed to the development of post-basic educational programmes that strengthen workforce competency and improve service delivery.

The consequences of post-basic specialisation include improved clinical competence, greater confidence, enhanced patient care, increased workforce capability, and improved preparedness for specialised clinical environments (2,11).

However, conceptual ambiguity arises when post-basic qualifications are interpreted as equivalent to specialty. Such ambiguity may create inconsistencies in professional recognition, educational pathways, credentialing, career advancement, and workforce planning. Contemporary healthcare systems increasingly require nurses who not only possess technical competence but also demonstrate leadership, research capability, systems thinking, evidence-based practice, and scholarly contribution (1,8-11). Consequently, clearer conceptual distinctions may support more consistent educational policies, professional standards, and career pathways.

Empirical Referents

Empirical referents are observable indicators that demonstrate the existence of a concept in practice (7).

For post-basic specialisation (*pengkhususan*), empirical referents include:

- Completion of recognised post-basic programmes;
- Certification in focused clinical areas;
- Demonstrated procedural competency;
- Hospital credentialing;
- Technical skill proficiency; and
- Clinical practice within specialised units.

In contrast, empirical referents for specialty (*kepakaran*) include:

Master's or Doctoral qualifications in specialised nursing disciplines;

- Advanced clinical privileges;
- Independent clinical decision-making;
- Research productivity and scholarly publication;
- Leadership appointments;
- Participation in healthcare policy development;
- Evidence-based practice implementation; and
- Contributions to healthcare innovation and knowledge generation (1,8,9,20).

Although some empirical referents may overlap, specialty encompasses broader scholarly, leadership, and systems-level contributions than post-basic specialisation. These distinctions further support the conclusion that the two concepts are related but not synonymous.

DISCUSSION

This concept analysis sought to clarify whether post-basic nursing is more appropriately conceptualised as clinical specialisation (*pengkhususan*) or specialty (*kepakaran*). The analysis demonstrates that post-basic nursing closely aligns with clinical specialisation, as its defining attributes emphasize focused clinical competency development, technical proficiency, and service-oriented practice. Conversely, specialty encompasses broader professional and scholarly characteristics, including advanced theoretical knowledge, evidence-based practice, research capability, leadership, critical reasoning, and professional autonomy. These findings align with contemporary nursing frameworks that recognize progressive development from competency-based practice toward advanced scholarly roles (1,2,8,9).

These findings also support Benner's Novice to Expert model, which posits that clinical expertise develops progressively through experiential learning and reflective practice (5). While nurses may attain high levels of clinical competence through years of experience with or without formal post-basic education, experiential learning does not automatically confer the broader scholarly preparation, expanded roles, or regulatory recognition associated with specialty practice. Thus, technical competence and specialty, though closely related, are not synonymous.

Importantly, the distinction between specialisation and specialty must be interpreted within national educational and regulatory contexts. Internationally, educational pathways and professional recognition vary considerably. While many healthcare systems increasingly associate specialty with postgraduate education (1,8,9), others recognize specialty nurses through structured post-registration certification and extensive clinical experience without requiring graduate qualifications (9,13,20). Therefore, specialisation and specialty are better understood as stages along a continuum of professional development rather than mutually exclusive categories.

Within the Malaysian context, postgraduate education remains the pinnacle of specialised academic preparation. The Malaysian Qualifications Framework (MQF) stipulates that a Master's Degree by Coursework or Research (Level 7) and a Doctoral Degree by Research (Level 8) require graduates to demonstrate advanced knowledge, independent research competency, and original knowledge generation within a discipline (6,14). Consequently, nurses completing these postgraduate degrees acquire specialised scholarly expertise. However, academic specialisation should not automatically be equated with specialty, which often demands additional advanced clinical competence, professional credentialing, and regulatory recognition (8,9,20).

The conceptual ambiguity identified herein has critical implications for nursing education, workforce development, and professional regulation. Conflating post-basic specialisation with specialty contributes to inconsistencies in educational pathways, career progression, and workforce planning. As healthcare complexity grows, nurses must integrate advanced clinical competence with leadership, research, and policy development (2,10,11). Educational reforms should therefore establish progressive pathways enabling transition from competency-based specialisation to postgraduate specialty education. Ultimately, clarifying the distinction between *pengkhususan* and *kepakaran* strengthens professional identity, promotes consistency in credentialing, and aligns Malaysian nursing education with international standards while respecting its unique regulatory context.

CONCLUSION

This concept analysis clarifies that post-basic nursing, within the Malaysian context, aligns more closely with the characteristics of clinical specialisation (*pengkhususan*) than specialty (*kepakaran*). The analysis demonstrated that post-basic nursing primarily focuses on developing focused clinical competencies, technical proficiency, and service-oriented practice within specific areas of nursing. In contrast, specialty nursing practice encompasses a broader level of professional development characterised by advanced theoretical knowledge, research capability, evidence-informed practice, leadership, critical clinical reasoning, and greater professional autonomy.

These conceptual distinctions must be interpreted within national educational frameworks and regulatory standards. Internationally, specialty nursing is recognized through diverse pathways; while some systems require postgraduate education, others rely on structured certification and extensive clinical experience. This variation reinforces that specialisation and specialty represent progressive stages along a continuum of professional development rather than mutually exclusive silos.

Within the Malaysian higher education framework, the MQF designates Master's (Level 7) and Doctoral (Level 8) degrees by Research as qualifications demonstrating advanced academic expertise and original knowledge generation [6,14]. While nurses holding these degrees possess specialised academic expertise, this scholarly specialisation should not automatically be equated with specialty, which requires parallel clinical competence and formal regulatory recognition.

Clarifying the distinction between *pengkhususan* and *kepakaran* has vital implications for nursing education, professional credentialing, and workforce planning. A shared conceptual understanding will support the development of coherent educational pathways, strengthen professional identity, and facilitate stronger alignment with international standards. Recognizing the complementary contributions of competency-based post-basic education and postgraduate scholarly preparation will ultimately ensure the continued advancement of nursing as both

a highly skilled clinical profession and a rigorous scholarly discipline.

LIMITATIONS

This concept analysis has several limitations. First, the findings are based on interpretation and synthesis of published literature rather than empirical investigation. Although a structured literature review informed the analysis, concept analysis remains inherently interpretive and may be influenced by the perspectives of the authors (7).

Second, definitions of specialisation, specialty, and advanced nursing practice vary internationally because educational systems, regulatory frameworks, credentialing requirements, and scopes of practice differ considerably. Consequently, the conceptual distinctions proposed in this paper should be interpreted within the context of the available literature and the Malaysian higher education and healthcare systems rather than as universally applicable definitions.

Third, although this study adopted Walker and Avant's concept analysis framework, the analysis comparatively examined the closely related concepts of specialisation and specialty to clarify the conceptual position of post-basic nursing. While comparative analysis provides valuable conceptual insight, alternative theoretical approaches may produce different interpretations.

Future research should seek international expert consensus through methodologies such as Delphi studies and explore how different educational, regulatory, and professional contexts influence the conceptualisation of specialty. Comparative studies involving nursing regulators, educators, and professional organisations across multiple countries would further strengthen conceptual clarity and support greater international consistency in specialty nursing education and credentialing.

CONFLICT OF INTEREST

The authors declare that they have no conflicts of interest related to this study.

AUTHOR CONTRIBUTIONS

MSN: Conceived and designed the study, supervised the concept analysis, critically reviewed the manuscript, and approved the final version.

MKCH: Contributed to the conceptual development, literature review, interpretation of findings, and manuscript revision.

TS @ SJ: Conducted the literature search, performed the concept analysis, drafted the manuscript, and coordinated the revisions.

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