

**CURRENT TRENDS AND ISSUES IN NURSING**

Mr. Nilesh Mhaske, Mr. Amit Kadu

Lecturer

**Correspondance Address :**

Padmashree Dr.VithalraoVikhe Patil Foundation's Nursing College &amp; Hospital, Ahmednagar.

**E- Mail:** [nileshmhaske1985@gmail.com](mailto:nileshmhaske1985@gmail.com)**Introduction -**

“The Physician, The Patient, The Drugs, and The Nurse are the four feet or Padas of the medicine, upon which the cure depends.” -“Sushruta Samhita”. 700-800B.C<sup>[1]</sup>

Nursing has been called the oldest of the art, and the youngest of the profession. As such, it has gone through many stages and has been an integral part of social movements. Nursing has been involved in the existing culture, shaped by it and yet being developed. The trend analysis and future scenario provide a basis for sound decision making through mapping of possible future and aiming to create preferred futures.

The future will see great advantages in prevention, diagnosis and treatment of illness and diseases with increasing demand for health care and health information. As large hospitals are replaced by high tech and small hospitals, health care will be provided in homes and outreach facilities and the focus will be on provider skill, outcomes and user preferences and satisfaction. Nurses will be the preferred care providers and entry points for diverse services.<sup>[2]</sup>

On the other hand there will be challenges related to Ethics, Rising costs, Access to care and Quality of care. Nurses will have an essential public health role and patient will become more demanding. Healthier life style, Continuum of care, Health environments and Evidence based practice will be emphasized and in the forefront of nursing agenda. Globalization will enhance free movement, Standardization and Wider opportunities and Challenges. The changing work environment will be driven by cost effectiveness and quality of care for which nursing is well positioned.

Philosophy of life, elements of human nature, Religious factors, political ideologies, socioeconomic factors, cultural factors and expiration of knowledge are the factors determining educational aims.<sup>[3]</sup>

Vocation, knowledge, complete living, harmonious development, mental and emotional development, physical development, moral development, character development, self- realization, cultural development, ideal citizenship and education for leisure are the general aims of education.

Progress in transportation, communication & other technological areas: e.g. automobile like aids e.g. telephone, motion pictures, radio, television, computer email and internet services. Use of ultrasound, CT scan, MRI imaging machine, electronic microscope radioactive isotopes for medical research, artificial respirator/ ventilator, discovery of latest generation antibiotics, findings of new drugs e.g.:vitamins to chemotherapy, penicillin, insulin and invention of other medical supplies like cool air machine, refrigeration, air and water mattress, electric beds etc.<sup>[4]</sup>

Nursing has a tremendous capacity to change people. The demands associated with nursing practice require a broad knowledge base and critical thinking abilities along with competent skills. The focus of nursing is shifting towards viewing patients as collaborative beneficiaries rather than passive recipients of care. Nursing require psychological, social and physical skills and certain attitudes, which are rooted in knowledge. The demands associated with nursing practice requires a broad knowledge base for decision – making. Critical thinking abilities and skills in the technological aspects of care.<sup>[5]</sup>

The function of the professional nurse in the hospital is more comprehensive. She will be actively involved in direct nursing care, health teaching, planning for care in home, rehabilitation and service to the outpatients. She may have to teach the students also.

Exposure to human ill, Sick child and baby, Dying patients, Cancer patients, Renal failure patients, Still birth etc., Closer nurse patient relationship, Helplessness, Feeling of incompetence in emergency



situation, Lack of resources. Often high unrealistic, expectations, High technology equipments, Communication breakdown and Heavy workload are the causes of stress among nurses.<sup>[6]</sup>

Nurses are responsible for public anger because: Nurses stay 24 hours with client, Nurses have to give answers for faults made by professionals of other disciplines. Work load is very heavy, Less time for counseling and guidance to patients. Unable to explain their own role in clients care and Poor orientation to clients and relatives.<sup>[5,6]</sup>

Professional judgment, Defining care, Information system or Effective Communication, Electronic network or Computer link, Problem Based Learning, Marketing or Privatization, Nursing standard, Nursing audit, Nursing research, Multidisciplinary health team, Independent area of practice, Community based nursing, Holistic care approach, Specialized services(dialysis, psychiatric etc.), Problem based learning, Distance learning (open university), Self – directed learning, Continuing education, Use of advanced technology, Consumer protection act on action, Change in uniform and dress code, Utilization of married nurses, Specialization, Leadership of nursing in 21st century, Human relation in nursing, Disaster management, Marketing strategies for nursing, Computer application in nursing, Space nursing, Nurse patient relationship and provision for nursing consultant or specialist are the emerging trends in nursing.<sup>[7,8,9]</sup>

### Historical Perspective in India -

- The first Nursing school started in 250 B.C. during Charakan time and only men were considered pure enough to be nurses.
- First hospital – started by East India Company in 1664 at Fort, St. George Madras – for soliders.
- St. Stephens Hospital Dehli- 1864 – First to train Indian girls as nurses.
- Modern nursing influenced by Florence Nightingale
- Suggestions on a system of nursing for hospitals in India.

- 1861 – Reforms in military hospitals all over the world.
- 1854-Training school started in Madras for midwives.
- 1871 – First nursing school started at Madras General Hospital.
- 1891 – Indian nurses came for training, Bai Kashibai Ganpal was the first Indian nurse to come for training
- 1905 – TNAI established.
- 1926 – Madras state formed the first registration council.
- 1946 – First four year basic Bachelor degree program established in R.A.K, Delhi and C.M.C.Vellore.
- 1960 – First Masters Degree program was started in R.A.K. College of Nursing Delhi.

### Men in Nursing -

- Good Samaitan – First man to provide nursing care.
- Group of men in 300 A.D started a hospital and provided nursing care during the black plague epidemic.
- Military, religious and lay orders of men continued to provide nursing care in middle ages.
- Two patron Saints – St. John of god and St. Camillus.
- 1988 – Nursing schools for men started in Newyork.
- 1901 – U.S. military nursing changed from predominantly male to female.
- After Korean war men were again permitted in nursing practice as well as schools.
- In 1966 less than 1 % male nurses.
- In 1996 5% of nurses are males .

### Transitions taking place in health care are -

Curative to Preventive approaches, Specialized care to primary health care. Medical diagnosis to patient emphasis, Discipline stovepipes to programme



stovepipes, Professional identity to team identity, Trial and Error to evidence based practice, Self – regulation to questioning of profession and focus on quality to focus on costs.

### **In the workplace the transitions taking place are -**

High tech humanistic, Competition to co-operation. Need to supervise to Coaching, Mentoring, and Hierarchies to decentralized approach.

### **Transitions taking place in nursing are -**

Continued Competencies to Competencies a condition. Hospital environment to community environment, Quality as excellence to quality as safe and clear role to blurring roles.

### **Major issues in nursing education are -**

Selection of student: Lack of valid tool to select proper students. Gap between theory and practice: there is vast gap between actual theory taught in classroom and the actual practice in clinical setting, Student status: In most of institutions students are vitalized for practice services, Nursing competencies: To develop nursing competencies knowledge, understanding skill and attitudes are essential factors, Under utilization of clinical facilities in government colleges/ schools, In adequate library facilities, Poor transport facilities, Less stipend for nursing students, Poor supply of AV aids, Less promotional opportunities for teacher of both schools and colleges, Very few M.Sc. courses is available, Few Ph.D.courses in nursing colleges and In private institutions: there is lack of qualified teachers, Hired building , Most institutes do not have own hospital for clinical practice, Very expensive, In adequate hostel facilities for students and poor provision of library.

### **The issues in nursing service are -**

Poor working condition, Staffing level not based on standard norms, Inadequate quality, in-service education programme, Less wages, Lack in format practice guidelines, Work activities role not well defined, Deficiencies in team work, Lacking advanced extended nursing practice, Professional

relationship with doctors decreasing day by day, Inadequate use of modern technologies, Inadequate availability of equipment and supplies, Poor team spirit among colleagues. Very few professional representations in higher authorities, Poor exposure of nurses in National conferences workshop and forums, Inadequate availability of scientific research findings. As the education raises the gap between nurses and patients also raises. Nurses are busy in administrative and paper works in comparison to bed side care. Nurses are not research oriented. Use of non professional manpower to deliver nursing service, Monitoring, Supervision, Recording, Deporting and Evaluation system are poor in nursing service. Expert senior nurses are usually not involved in planning nursing manpower in an institution. There is no system for scheduling planned annual leave for nurses. Lack of autonomy and empowerment for nursing leaders, Lack of understanding of nursing professional roles and responsibilities in general, and gap in the latest managerial knowledge and skills among senior nursing leaders.

### **Common problems of nursing administration are -**

Poor involvement of nursing administrators in planning and decision making in the government hospital administration. No specific power has been assigned to nursing incharges but has been made incharges of all inventories and linen of hospital. In many institutions nursing superintendent will have no authority to sanction leave to their subordinates. Lack of knowledge of management of nursing administration among administrators. Administrators most of the time depend on the advice of clerical staff in all matters including technical aspects, prevalence of role ambiguity among administration and administrators, unnecessary involvement of non nursing personnel in nursing administration. No clear cut written nursing policies and manuals, Poor job description for various nursing cadres, Poor organized staff development programme, which includes Orientation, In-service education.



Continuing education etc,. Poor provision of incentives like Awards, Visits, Praise, Conferences etc. Inefficiency of nursing councils to maintain standards, and inadequate efforts at higher level for implementation of separate directorate of nursing.

Less educational preparation, refusal to accept new role, Adhere to tradition, Failure to unity among nurses, Failure to work with consumers or public, and Failure to deliver nursing care to meet (satisfy) public needs are the common professional limitations in nursing profession.

#### **Scope of nursing are -**

Career options include : Staff Nurse, Ward sister or Nursing Supervisor, Department Supervisor/Assistant Nursing Superintendent, Deputy Nursing Superintendent, Nursing Superintendent, Director of Nursing, Community Health Nurse (CHN),Teaching in Nursing, Industrial Nurse, Military Nurse, Nursing Service, Nursing service administrative positions.

#### **Conclusion -**

Transition generally occurs or takes place in each and every individual of this world. Nurse as an individual, involved in caring profession, also faces this transition and nothing but the passages or changes from one situation or state to another that occurs over time. There are often wide ranges of emotions experienced during the transition process that can affect the emotional and physical well being.

#### **Some ways to prepare for transition process are -**

Posting thinking, Flexible to adjust in various situations, Organized personal life, Practice healthy life style, find an ideal mentor, have some fun and able to know what is expected to learn to rules of road early.

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