

NURSES : A FORCE FOR CHANGE – A VITAL RESOURCE FOR HEALTH.

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Introduction :

The International Council of Nurses (ICN) has celebrated nurses day since 1965. In 1953 Dorothy Sutherland, an official with the U.S. Department of Health, Education and Welfare, proposed that President Dwight D. Eisenhower proclaim a "Nurses' Day"; he did not approve it. In January 1974, 12 May was chosen to celebrate the day as it is the anniversary of the birth of Florence Nightingale, who is widely considered as the founder of modern nursing. Each year, ICN prepares and distributes the International Nurses' Day Kit. The kit contains educational and public information materials, for use by nurses everywhere.^[1]

International Nurses Day is celebrated around the world every May 12, the anniversary of Florence Nightingale's birth. The International Council of Nurses commemorates this important day each year with a theme. The theme for year 2014 is

"Nurses: A Force for Change – A Vital Resource for Health."

AN EDUCATED NURSE WORKFORCE + A GOOD WORK ENVIRONMENT = HIGH QUALITY CARE

This simple, evidence based, equation whether applied at a global or a local level in the health system is fundamental to understanding how to make the best of the vital resource which is nursing.^[2]

Over the past decades, we have seen changes in disease burdens as well as in demography. The heavy and increasing burden of non-communicable diseases (NCDs) including mental disorders and an ageing society has forced governments and the health professions to think differently. This has led to an increasing focus on disease prevention and health promotion and to a shift in the locus of care provision from institutions to community-based primary health care. New infectious, environmental and lifestyle risks at a time of rapid demographic changes threaten health security for all. This has also brought

forward a need to refocus on holistic care namely person centered care and a life-course approach.^[3]

Investing in nursing can make a difference. A number of researchers have demonstrated that affordable nursing interventions can effectively contribute towards achievement of the Millennium Development Goals as well as in reducing the burden of NCDs. The strengthening of primary health care will be essential in addressing the burden of chronic disease as well as in reaching the most vulnerable and marginalized members of society and nurses will play a key role in this. To make best use of nurses in the health system they should be encouraged and supported to perform at their highest potential.^[4,5]

Nurses have a great responsibility to improve the health of the population as well as to contribute towards achievement of the global development goals. It is essential that nurses and world leaders focus on the global nursing workforce as a key priority for achieving better health for all.

AN EDUCATED NURSE WORKFORCE -

WORLD HEALTH STATISTICS-2009 on Health workforce indicates that globally, there are 13 physicians per 10000 population, with large variations between countries and regions. In the African Region, there are only 2 physicians per 10 000 compared with 32 per 10 000 in the European Region. Globally, there are 28 nurses and midwives per 10 000 population, ranging from a low of 11 per 10 000 in the African Region to a high of 79 per 10 000 in the European Region. In India, there are 13, 72,059 nurses with the density 13 per 10,000 population.^[6,7,8]



Table-1 Distribution of Nursing Institutions and the Admission Capacity as on 13 DEC 2012

Year	ANM		RGNM		B.B.Sc		P B BSC(N)		M.Sc (N)	
	Number of Institute	Intake capacity	Number of Institute	Intake capacity	Number of Institute	Intake capacity	Number of Institute	Intake capacity	Number of Institute	Intake capacity
13 DEC 2012	1,642	46,719	2,670	1,09,220	1,578	80,245	696	22,655	535	10,026

A Good Work Environment -

The importance of the work environment has been significantly underestimated as a key aspect of understanding in the deployment of nurse resources. Without a good working environment adding additional nurses to the workforce may have little or no effect, whereas adding nurses to a good working culture will have a significantly greater benefit. As Aiken et al (2011b) note “the significant interaction between nurse staffing and the work environment implies that the effect of nurse staffing is conditional upon the work environment and alternatively that the effect of the work environment is conditional on nurse staffing”. They were able to demonstrate that in hospitals the better the nurse work environment the lower the odds on deaths and failures in hospitals across the entire nurse staffing.^[9,10]

“The Penn team found that each additional patient per nurse was associated with a 6 percent to 9 percent increase in the odds of a patient's readmission with 30 days, depending on the condition. Good nurse working environments were associated with 7 percent, 6 percent and 10 percent lower rates for heart failure, acute myocardial infarction and pneumonia, respectively.”

Much attention has been placed on the importance of organizational and corporate culture but perhaps less attention has been on the local conditions which enable best practice to occur. In a detailed concept analysis based on a theory of practice development, an international group of nurses identified five attributes all of which they considered to be necessary for an effective workplace culture to be judged.

These are -

Attribute 1 - Specific values shared in the workplace; these are person centeredness; lifelong learning; high support and high challenge; leadership development; involvement and participation of key stakeholders; evidence use and development; positive attitude to change and continuous development; open communication; team work; safety.

Attribute 2- Shared vision and mission with individual and collective responsibility.

Attribute 3- Adaptability, innovation and creativity maintain workplace effectiveness.

Attribute 4- Appropriate change driven by the needs of patient's/communities.

Attribute 5 - Formal systems exist to continuously enable and evaluate learning, performance and shared governance.

High Quality Care -

The Fifty-fifth World Health Assembly, Having considered the report on quality of care Concerned that the incidence of adverse events is a challenge to quality of care, a significant avoidable cause of human suffering, and a high toll in financial loss and opportunity cost to health services; Noting that significant enhancement of health systems' performance can be achieved by preventing adverse events in particular, and improving patient safety and health care quality in general.



Referring To The Various Facets Of Quality, Who Determines Quality In Following Ways:

- health outcomes for individuals and communities, based on need.
- delivering health care in a manner which maximizes resource use and avoids waste.
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- delivering health care which takes into account the preferences and aspirations of individual service users and the cultures of their communities.
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- delivering health care which minimizes risks and harm to service users..

Conclusion -

We often think of nursing as giving medications on time, checking vital signs to see if the doctor needs to be called, or taking an admission at 2.00 a.m. with a smile on our faces. Too often, we forget that nursing is much more than this, it's all about caring. Nurses' work, no matter bound by paper work, short on hands, sleep & energy but nurses are rarely short on caring. Our job as nurses is to cushion the sorrow and celebrate the joy, everyday, while we are 'just doing our jobs.'

References -

1. en.wikipedia.org Portland: International Nurses Day, 2014 [updated 2014 Mar 25; cited 2014 Apr 29]. Available from http://en.wikipedia.org/wiki/International_Nurses_Day
2. icn.ch Geneva, Switzerland: nurses a force for change a vital resource for health,2014 [cited 2014 Apr 29]. Available from <http://www.icn.ch/publications/2014-nurses-a-force-for-change-a-vital-resource-for-health>.
3. icn.ch Geneva, Switzerland: IND Kit, 2014 [cited 2014 Apr 29]. Available from http://www.icn.ch/images/stories/documents/publications/ind/IND_Kit_2014.pdf
4. indiannursingcouncil.org New Delhi: Distribution of Nursing Institutions and The Admission capacity, 2012 [cited 2014 Apr 29]. Available from <http://www.indiannursingcouncil.org/pdf/31-Oct-2012.pdf>
5. indiannursingcouncil.org New Delhi: gnm recognized Nursing Institution, 2012 [cited 2014 Apr 29]. Available from - <http://www.indiannursingcouncil.org/pdf/gnm-recognized-Nursing-Institution.pdf>
6. indiannursingcouncil.org New Delhi: bsc recognized Nursing Institution, 2012 [cited 2014 Apr 29]. Available from <http://www.indiannursingcouncil.org/pdf/bsc-recognized-Nursing-Institution.pdf>
7. who.int/en/ Geneva, Switzerland: Health workforce, infrastructure, essential medicines. World Health StatisticS, 2009 [cited 2014 Apr 30]. Available from http://www.who.int/whosis/whostat/EN_WHS09_Table6.pdf?ua=1
8. News from ministry of health and family welfare, government of India: shortage of trained nurses and midwives. *Nightingale Nursing Times*,2014;9(10):10-11.
9. who.int/en/ Geneva, Switzerland: Quality of Care, A process for making strategic choices in health systems 2012 [cited 2014 Apr 30]. Available from http://www.who.int/management/quality/assurance/QualityCare_B.Def.pdf
10. Erin Pettengil, Tamilnadu Nurses and Midwives Council, *Journal Of Community Health Nursing*,2013;1(1):36.