Future Implications for Nursing Practice

Prof. Sumitra Chakraborty

Nursing practice perhaps originated from the very instinct of preserving and protecting life. With the passage of time, nursing practices and services became more refined and are striving for excellence for making the profession more befitting to the needs of contemporary society.

Significantly, nursing service is one of the largest and important service-resources of any health care establishment. The primary purpose of nursing practice is to provide quality care to the patient as an integral part of comprehensive health care services rendered by a health-care organization/institution. Basically the practice of nursing, with blend of mental skill, attitude, intellect and knowledge is directed towards alleviation of human sufferings. The underlying philosophy of nursing practice is that comprehensive quality nursing care can be rendered by professionally qualified nurses who assist in diagnosing, assessing, planning and treating human beings seeking health care.

Who is a Nurse?
A nurse is a health care professional engaged in the practice of nursing. Indira Gandhi once commented "A nurse is not merely an assistant to doctors. She has an independent part to play in many areas where doctors need not necessarily be present".

Nursing as a service or as a profession has both individual identity, as well as creative, interactive, dynamic ever-changing team identity. Being a team member of health care professionals, nurses are responsible for care, treatment, safety and recovery of acutely or chronically ill or injured human beings, health promotion and health maintenance of healthy beings, life-saving emergencies and health support services in a wide range of settings. Inter disciplinary and cross sectional adaptations in nursing practice are necessary to meet global health targets. Human beings being viewed as a sum total of one's physical, social, mental, spiritual, environmental and intellectual entity, nursing practice has changed its role from biomedical support provider to a general care taker.

The fundamental objectives of nursing practices are preventive, promotive, curative, restorative, and rehabilitative at individual, family and community levels. Nursing services are equally important in a wide range of health care establishments like hospitals; rural and urban public health agencies; ambulance, army, navy, air force; homes for aged, orphans, destitute; asylums; international organizations like WHO, UNICEF, disaster relief camps and so many. Hence nurses continue to be in high demand the world over. Nursing practice, as a service is rapidly flourishing. Indian nurses with sound academic background and dedication are still striving to reach commitments and obligations for meeting the societal demands and for meeting the changing scenario in health care.

Like other professions, nursing services are also based on some criteria of a profession, as: (i) well defined body of knowledge; (ii) strong practical service orientation; (iii) code of professional ethics; (iv) autonomy; (v) belongingness to professional group; (vi) emphasis on research and development; and (vii) set of organisational standards for its practice.

The problems of nursing practices in India were identified by different committees like Bhore committee (’46), Shetty committee (’66), Kartar Singh committee (’73), Bajaj committee (’86), High power committee on Nursing and Nursing profession (’89) and the like, worked on to improve various aspects of nursing - administration and education, service and practice. In 1947 INC and in 1965 the Associa-
tion of Nursing Superintendents came into being. In 1908, Association of then Nursing Superintendents broadened its scope and founded Trained Nurses Association of India, whose Centenary year we are celebrating in 2008.

During last few decades nursing practice has been facing some challenges. Ancient concept of health care was much closely associated with divine worship and sacred acts. However the present changing concept of health and health care system reveals the changing concept of nursing. Fundamental rethinking is necessary to rationalise the present outlook. Patterns of nursing practices have entered a wider field. Patterns of nursing care should change in a positive way to meet the new trends and new situations as they arise.

Some prominent changes are outlined below:

**Characteristic of population**
Birth rate, mortality and morbidity rate are in descending trend while life span and longevity show opposite trend. This is demographic transition. More lifestyle diseases are coming up now. Geriatric problem is serious. Industrial and occupational health problems are also in front step. Needs of population are also changing its dimensions. This is epidemiological transition. So nursing practices are also searching ways to take responsibilities of these new and different health problems. Much more wider role of nurses are in pipeline with the changing outlook of society.

**Social, physical and economic situation**
India is acquiring more economic independence, with a growth in its national income. Reformation and re-organisation in traditional agriculture-based social structure is visible everywhere. Some changes are hard to understand, so resistance is there. Population is moving for more sophisticated health care. Treatment is gradually becoming costly. So social and individualistic approach in nursing practice is necessary. Nurse has to understand the potential danger of social turmoil. Practices must incorporate opportunities to adjust these changes, irrespective of risks.

**Knowledge sphere**
Medical science is witnessing unprecedented advances. Vast knowledge explosion is creating a gap between existing nursing practices and expectations. Hence nursing practice must always keep pace with time, and be resourceful. Advance Nursing care and clinical specialization are becoming a necessity. Besides general nurse, more and more clinician nurses are required. Nursing practice can move to both clinical specialisation, e.g. diabetic nurse, cardiac nurse, oncology nurse, as well as discipline/field specialisation e.g., industrial nurse, disaster nurse, under-five clinic nurse. Nursing as a professional body needs to implement sorts of standards in this regard. Registration policy also needs amendment to bring the new need-based practices to the fore.

**Scope for health care facility**
Quantitative scope for health care facility is at higher level now. In three-tier health care delivery system, health is concern of all. It is not only for sick and disabled, but for healthy beings as well. People seek health care not only in crisis, but for anticipated potential risks also. In primary health care concept, nurse performs in expanded role - disease protection, prevention, rehabilitation, community health, referral services etc.

**Health care technology**
Medical diagnosis and treatments are now instruments-and technology-dependent. Growing complexity of information technology has necessitated the inclusion of specialised technicians. Telemedicine is a reality now. Nursing practice still needs to understand how modern technology and instrumental device in health care works. Nursing practice needs changes to withstand the challenges of technological revolution.

**Health Service Policy**
Nursing being the vital part of health services, all decisions regarding policy are taken at Government level. Health globalisation has influenced the government to amend the attitude towards health care services. Public-
Private-Partnership (PPP) model and medical tourism are the latest trends to promote foreign revenue as adopted in Indian Health Policy (2002). With initiation of Industrial Dispute Act ('47) in health care, also the application of Consumer Protection Act ('86), the approach has changed significantly. Health care is now turning to be a commodity, with patients as consumers. So, nursing practice must incorporate excellence to share the national and international threshold. Nursing practice warrants more dedication and carefulness.

Leadership and management development programme need to be incorporated for broadening the scope of nursing practices in India to match global standards. Nursing administration must look into the fact that practicing setup, working conditions are conducive to achievement of quality care. Vigorous works on task analysis, job analysis, support system analysis, manpower analysis are necessary, as all have direct impact on nursing practice. Nursing Research Society of India (1987) is promoting research works to fine tune nursing practices. Education is an important tool to bridge the gap. Nursing practice, administration, research and education are all interwoven with each other. Nurses still today have to work under tremendous constrains and pressure. Change has set in nursing practices, but extent and direction of changes in nursing practices are still to be resolved. Wave of change has shifted nurse towards being a practitioner, clinician, educator, team leader, administrator, even policy planner, besides its traditional role. To bring up more dedication and commitment into practice some of the table tasks can be considered to be shifted to other technical categories.

Nursing leaders needs to be more involved in policy making. Role models in nursing is a demand from society. Our slogan is care of people at the level of satiuation.

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