# Nursing Resource Planning: Approaches and Emphasis

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*Keynote Address, Plenary Session - I*

We have gathered here in the city of Ahmedabad from all parts of India to meet and deliberate on the theme "Re-assessing Nursing Care - A Challenge for Nurses in the Twentieth Century". Our focus is on evaluation of the current situation and plan for future. Collectively we have to think and chalk out a course of action. I thank the organisers for giving me this opportunity to talk on 'Nursing Resource Planning: Approaches and Emphasis'.

Chambers 20th Century Concise dictionary gives the meaning of the word resource as a source, a means of support

expedient=that which serves to promote

suitable=means suitable to an end, suitable

plan - a scheme for accomplishing a purpose

- a proposed method.

In other words, planning nursing resources is a proposed method to reach the end of providing quality nursing care for the future.

Planning is a process which is essentially the job of relating objectives to resources keeping in view the strategy that has been decided and it relates to future and not to conditions existing today. According to Allen ' management planning involves the development of forecasts, objectives, policies, programme, procedures, schedules and budgets. In short, a plan is a trap laid to capture the future just like a fishing net to catch the fish.

Many categories of health personnel are involved in the delivery of health services. For effective health planning, it is important to know the numbers and distribution of all health personnel and the resources available.

The process of planning encompasses the stages of preplanning, analysis of the existing situation, determination of priorities, selection of a plan, implementation and evaluation. The current trend in health care system is to adopt the health team approach. This involves a change in the role of the nurse from the traditional one of assistant to doctors to that of partner in the planning, implementation and evaluation of health programmes. To do this, it is essential to pay greater attention to the training of nurse leaders who can re-examine and redefine roles, identify unmet nursing needs, survey the resources available to meet them and establish realistic and attainable goals.

An accurate analysis of the current nursing situation is needed for preparation of plans to meet future needs. Hence questions that need to be answered are: 1. What types of nursing resources i.e., personnel , money, material and facilities, are available and to what extent? 2. How are they organised, both administratively and functionally? 3. What resources and categories of resources are being utilised in each type of service and programme? 4. How effectively are nursing services being provided? 5. What is the future potential for nursing resources?

These can best be answered by collecting, analysing and interpreting relevant information which should include:

a. The system of health care delivery, types of care, preventive services and pattern of administration.
b. Organisation of health care services which has a component of nursing categories of services, number and size of category, programmes and functions of each.
c. Organisation of nursing within the health sector.
d. Legislation on nursing practice and education.
e. The structure of the nursing personnel system, nomenclature, type of training and registration.
f. Nursing manpower available showing category, sex, level of training, function and attrition rate or turnover.
g. Deployment of nursing manpower-number in each category, type of service, geographical distribution and difference in urban vs. rural areas.
h. Adequacy of education and training—preparation for level of functioning and inservice training.
i. Utilisation of nursing personnel. This should show types of nursing activities or otherwise and time spent.
j. The number of vacancies to be filled to see the demand for personnel and supply.
k. The personnel policies of the employing institutions—current and future recruitment showing hours of work, salaries, fringe benefits, promotional opportunities, deputations, and so on.
l. Other purveyors of nursing care i.e. relatives' participation in care of patients, the use of ancillary workers.

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m. Education and training programmes. Capacity for training each category and distribution of institutions, availability of students, teachers, budget.

n. The potential nursing manpower supply. This is the crux of the matter for planning nursing services which should include:
   - level of female education.
   - career choice of girls and entry to university education or vocational education.
   - Socio-economic factors
   - women's status
   - image of nursing profession remuneration for nurses.
   - number of inactive nurses
   - non working
   - married nurses
   - part time provision
   - Career mobility of nurses
   - turn over/attrition rate
   - hierarchy and promotion

Quality nursing care in adequate quantity is essential for the development of the human resource for the Indian population. As the delivery of health care primarily depends on trained manpower without which the human or material resources can neither be properly exploited nor used, I shall deliberate on this aspect now.

Comprehensive nursing care can be given only by adequately trained nurses. Though there is no dearth of human resources in India, trained manpower is lacking especially in nursing. A look at the health statistics of India will reveal the naked fact that the number of nurses available in India is far lower than the number needed and the production of qualified nurses is so low that it cannot bridge the gap in the foreseeable future. And the preparation of nurses at a higher level as specialists is very negligible. Nurse is the single category of health workers who attends patients round the clock and is engaged in coordination of all the medical and allied care services. Adequate preparation and deployment of them in appropriate ratios is of vital importance for ensuring quality care. This has been recognised by World Health Organisation and I quote Dr. Halfdan Mahler.

"If the millions of nurses in a thousand different places articulate the same ideas and convictions about Primary Health Care and come together as one force, then they could act as a Power House for change. I believe that such a change is coming and that nurses around the globe, whose work touches each of us intimately will greatly help to bring it about. WHO will certainly support nurses in their efforts to become agents of change in the move towards health for all. In order to realise the full potential of this power house, nurses will need to be organised and equipped to break down resistance to change and to develop strategies and action plans. After some years of doubt, WHO has now grasped the significance of this potential. Indeed the organisation is well aware that nurses have already begun to lead the way and many have good success to show. Given the potential of nurses to take their place in the forefront of the Health for All movement, the following changes will take place:

- Nurses will become resources to people rather than resources to physicians.
- Nurse leaders will increasingly innovate and participate in programme planning.
- More and more nurses will become leaders and managers".

This, he said, is not an easy process and will need active support in factors like:

- new attitudes and values.
- reorientation of education programmes
- better resource allocations and
- well defined policies and plans for development of nursing personnel

In order to plan for improvement of the contribution of nurses in the health care delivery team, the nurse must, in collaboration with the planners of other health services, define the activities involved in the performance of various functions for which nursing is responsible. It is particularly important for nurses to take initiative in this, since they may be the only group to appreciate that certain essential aspects of nursing will be excluded from the programme if provision for the necessary time and resources involved is not made in the plan and budget for nursing.

If quality control by means of supervision is used as an example of a function, the activities that will be involved include the planning and coordination of a programme of supervision and consultation to meet staff needs, the planning of education and training including inservice training, the professional supervision of nursing personnel, conselling for professional development, and the development of suitable areas for clinical and field practice.

The ingredients of technical manpower planning can be summed up in a Pneumonic-Planning:

Project manpower demands and analyse existing resources.
Long lead time between need and supply of manpower-time of training.
Absolute need for team work.
Need of new patterns and variety of approaches.
Need for feed back system
Increased cost of training and retraining manpower.
Need for designing evaluation system.
Getting substitutes for skilled people is difficult, so discourage migration.

Strategies to increase nursing manpower include:

Develop nursing policy and resources.
Forecast manpower needs and eliminate haphazard growth.
Increase number of seats in schools and colleges of nursing and start new ones.

Crash programme to prepare needed personnel.

Plan to use auxiliary workers and non-working people.

Ensure proper utilisation of personnel and prevent turn over.

Improve efficiency of services in service training and better facilities.

Need to set up a staff college for M.Sc./ Ph.D in nursing.

Need to improve documentation system.

In short, manpower planning is concerned with a systematic organisation of the goals, objectives, priorities and activities of manpower development in order to ensure the:

- Right number of staff of the right kind at right place at the right time for doing the right function.

Just as we emphasise on teaching a PTS student about administration of medicines:

- Right medicine to the right patient- in the right dose at the right time in the right way.

The nurse leaders have to emphasise on the 5 rights in nursing manpower development and utilisation for quality nursing service.

Friends, at this time when we are reassessing nursing care to prepare for the 21st century, let us evaluate ourselves and see:

- Where are we as a profession in the health care delivery system?
- Where should have we been?
- Why haven't we reached the optimum level?
- How can we bridge the gap?
- What can our professional association do in this state?

Nobody is going to tell us, we have to find the answers and also strategies to improve the system.

The emphasis should be placed on justifying the need for establishment of an apex infrastructure with nurses engaged in the planning and policy making for nursing at the highest level with needed authority, finance and Govt. support. This would lead to a rise in the professional image, attract talented youngsters to enter nursing, provide career opportunities to nurses; reduce turnover (brain drain) due to job dissatisfaction, increase patient's satisfaction and raise the status of nurses in the country. Each nurse has a crucial role to play for this i.e., irrespective of the professional preparation or position, each one must make an honest effort to keep oneself abreast with the latest development in nursing care services, develop newer skills and demonstrate right attitude in caring for the patients. Each one must try to become an expert in her own area. And never hesitate to demand for adequate provision of equipments and supplies. Each one must also develop skills in problem solving, communication, decision making, planning and collective bargaining. The expertise of a person can never be underestimated by any one.

Friends, let us search our hearts. Are we proceeding in the right direction? How seriously do we take our professional responsibilities. For every mountain there is a valley. In order to get something, we have to give something. In fact giving is more important that receiving. This is more true in the profession of nursing we have chosen as a career. Let us do our best in this attempt. I would like to close this with a living example for the importance of Resource Planning Approaches - not from nursing, but from daily lives of women as majority of nurses are women. Let us take the case of baking a cake.

A woman baked a cake and while eating children and husband said that it is not very nice or up to the mark which she herself also felt. She analysed the reasons for the same so that it will be better next time... what could the reasons be? It can be straight away seen as resource planning and execution... which boils down to money, man and material.

*Money*... due to shortage she used vegetable oil instead of pure ghee; could not use nuts or *badam*. *Man*... due to lack of knowledge, training experience - she did not know properly the recipe; she did not know the ingredients and its proportion; she never properly had a demonstration; she had never made it earlier (no knowledge or skill); was tired , no one to assist. *Material not available*... no good oven; electricity went off in between; baking pan was not proper; adulterated ingredients; no measuring bowl; and so on. In *Planning too* she failed... she had none to assist; less time and so much hurry; hadn't saved money. *Result*... half-baked, unpalatable cake, dissatisfaction.

If she wants a better one in future. Let her plan—set aside money and purchase right ingredients, right pots and pans; Let her get a recipe—observe someone doing practice and then become perfect; Let her set aside a time—get help if needed and make one and eat proudly. This is possible only if she uses appropriate strategy in planning and execution and the providers facilitate the activity.

It is as simple as this in nursing too. Plan resources if you need to improve and give quality nursing care... Tell your administrators - write to them the sure method for improving nursing care services. If planners are serious they should take the nurse leaders in their planning group and allocate adequate funds for placing sufficient number of nurses with the right qualification and experience at the right places with proper working conditions to contribute their best in the joint venture of building healthier citizens for our nation.

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