Specialisation in Nursing

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While thinking of specialisation, I often remember the story of one such super specialist who was unable to attend a patient with problems in the right nostril as his area of specialisation was the left one. This was narrated by one of my teachers in reference to the subject of specialisation and super specialisation. If this was to be true, then days are not far away when a team of specialists would be needed to take care of this wedge-shaped structure on our face. Besides this, with the acceleration of medical sciences the list of medical specialists could contain "index finger specialist", "ear-lobe-specialist", "tongue-specialist", "long bone specialist" etc., etc.....the list could go on.....!

Jokes apart, what is specialisation ? Why today the world is thinking in terms of specialisation ? Why the specialists are receiving increasing importance ?

Who is better ? —a generalist or specialist—could be a subject of controversy. But the fact remains that the generalists in the health sciences, with all their advantages and disadvantages are fast getting disappeared. And the specialists are pouring in full swing to fill in the vacancies. This itself demonstrates the demand for specialists in today's life.

Specialisation strengthens mental faculties, it is said. It also expends one's intellectual horizon. Specialisation helps grooming a learned man who acquires knowledge and skills in breadth with advancing power of understanding, analysing, synthesizing of existing facts and generating new knowledge and then successfully transmitting this wisdom. The scholars, the intellectuals, the innovative genius—all are products of specialisation.

The scope of specialisation in any field sets the standard of excellence and enhances its position in the academia. The items of its specialisation give a distinctive quality to any profession and keep the profession always on the move, seeking newer challenges and finding inventive and innovative solutions to them. A dip in the course of specialisation increases acumen and efficiency striking individuality in techniques and approach.

The purview of specialisation in any field is the symbol of its brilliance and also the quality and speciality of the field. An inclination towards scholastic contemplation through the process of specialisation, propagates the professional viability. A scholarly attitude inculcated in the course of specialisation stimulates multidimensional growth of productivity conscious profession. Hence it injects a quest for better services of quality care.

The specialisation pattern in nursing has been framed following the design of medical-model. Nonetheless, this system though not foolproof yet serves the proposed purpose to some extent.

The basic progamme in nurrsing lays the foundation on which the course of specialisation is dynamically balanced. This course aims at building proficiency in diversified areas in nursing. It allows personal gains for nurses as well as prepares them to set newer directions for the profession. It also makes the nursing folks susceptible to new ideas and interpret them into various operational modes, and procedural innovations, enriching further the wealth of knowledge in nursing. It also induces awareness in the nurses to make thoughtful judgement and rightful implementation of them.

It is a matter of pride that the nursing profession can boast of specialists in its possession who could be trend-setting performers in all spheres of nursing. But it is a paradox that there exists a fretful dearth of appropriate vacancies to absorb them. Thus the nursing manpower remain unutilised. This can be attributed to the absence of a proper recruitment culture.

Lacunae, that exist in recruitment policies allow attempts on the part of appointing authority to disregard deliberately the specialisation system in nursing. It is also a distressing fact that specialists' positions are virtually non-existent in the patient-care areas.

It must have been noticed by all that sometime ago a nurse-specialist, through the columns of *Nursing Journal of India* had expressed her dismay, when she was denied a position in patient-areas. There may be many others to echo similar instances.

There have been, from time to time, many round-table conferences to find out ways and means for improvement of patient-care standard. But it is a tragedy that these talks across the table have not been result-oriented as no genuine effort has been in sight to replace the primitive plans and programmes for uprooting the traditional stagnancy in the process of recruitment.

Quality patient-care is an important criterion in improving patient-care standard and thus to win public confidence. A careful investment of quality manpower can only ensure steady returns of quality service. The only way through which this can be achieved is by increasing employability in the specialised areas of nursing care service.

If we wish to accelerate the patient-care-standard, firstly, the traditional ward nurses responsible for patient-care-management need to be replaced by aptly prepared nurse specialists. Also job opportunities are to be created for the specialist nurses to work on the patients' bedside. The present incumbents need not be concerned at this arrangement. They should be able to sense the need for that.

Then it is not only through a series of degrees one can obtain a course of specialisation. There are various ongoing schemes offering various courses of specialisation. They must take initiative to avail these in their chosen fields of specialisation. This will help

them develop a sound knowledge and also skills in technical know-how. Also this will help them keep abreast of the latest technological, managerial and operational developments. They, then, will be able to make desirable contribution in the quality-patient-care with increased confidence. They will also be able to commend dignity and respect through their quality performance.

The educational units in nursing have limited opportunities for specialists' placement, but sparing a few exceptional cases their utilisation is also highly improper. A specialist nurse trained in a particular discipline often finds herself placed to quite another area and her knowledge and skills remain unutilised and thus wasted. Lack of courage and determination prohibits the nurses to resist to such anomalies.

Allow me to take the opportunity to give vent to my personal grievances. I was appointed on ad hoc basis as senior lecturer in one nursing institution, which conducted both the baccalaureate and the post-baccalaureate programmes in nursing. I was placed in the Medical-Surgical-Nursing Department as per my specialisation in that field. After about a year's service, an interview was held for regularisation of my post. Surprisingly at the interview, I was offered the post of Head of the Department of Community Health Nursing, which had fallen vacant shortly before. Since I had no preparation and proficiency in that area I did not agree to acept the offer of the said post. Then two options were placed before me by the interview board—either I accept the offer or I lose the job. In sheer desperation I opted for the second choice. A couple of days later I was handed over a sealed envelop through which I was intimated that my services were terminated. Of course, this may be one of the hundred of thousand incidents happening everywhere.

It is high time to cry a halt to such evil practices. All nurses must come forward to form jointly a formidable front for fighting against such exploitation because what is at stake involves not only one or few nurses but all nurses, in fact, the whole profession.

Apart from such external hazards, there are certain other appaling factors for which the nurses only must be made responsible. A section of the nurses willingly oblige their authority by practising in areas of specialisation, which is not the field of their preparation. It expresses alarm because these nurses ignore their own educational worth and pose themselves as the "jacks of all trades". Instead of adhering to the subjects of specialisation, they dabble into something of which they know little about. This is bound to slow down their mental faculties and in the long run they are bound to suffer from intellectual confusion.

Besides damaging their personal competency, they also pose themselves as dangerous elements causing inexcusable harm to the students. Their action puts the students' future at stake. Because pursuit of excellence on the part of the students depend largely upon the preparation and ability of a teacher to convey the knowledge material. An abysmal lack of knowledge on the part of the teacher cannot serve this purpose. Their action not only defies the process of specialisation, but also forces mediocrity upon the profession. The pride of the profession gets denuded in their hands.

An element of doubt is raised with their anti-scholarly nature. What do they lack? Are they deficient in professional maturity that they fall easy prey at the hands of the authority? Or do they lack moral and legal obligations to their students and also to the profession? Or do they willingly act as disrupting forces to strangle the even and onward move of the profession in exchange of personal gains?

This issue has certain danger about it. Nursing is "service to people", and quality of one's service is directly proportional to the quality of one's preparation. If this practice continues, the seriousness, the dynamism, the capacity to monitor one's action, one's intellectual response, would reach a dead end. This would also paralyse all initiative and progress of the profession dragging it towards decay and peril.

The present state of affairs in nursing, thus needs a close and intent look with unallayed concern and udiluted convictions. It is necessary to conceptualize the crisis. The situation must be reviewed in its entirety. Instead of reaching solutions through lip service, it is necessary to get into the bottom of the problem to uncover its certain built in faults.

All nurses need to pool their thinking faculties to introduce new strategies. The dubious recruitment policies should be removed. A trusted formula which is based on rational ground and also which works, is the need for the hour to build up a process of proper absorption and utilisation of nursing manpower. Steps need to be initiated to introduce new posts attuned to revised policies. Topmost priority should be attached to the implementation of the operative part of the policies.

To ensure proper nourishment to the quality of the profession, nurses willing to undergo a course of specialisation would require thorough screening for better professional output.

Each area of specialisation in nursing must be well-defined. Taking into account the contemporary standards, consciousness must be developed for improving performance. Because our performance profile is the testimony to our professional quality.

Those nurses found tampering with specialisation process should be dealt with sternly by the concerned nursing authority. Mass awareness is to be spread amongst students so that they too are able to exert concerted protest in helping undo malpractices.

The morale of the nurses needs boosting to move up their confidence enabling them to put a bold front and not to act under pressure. The onus for dealing with the unscrupulous authority lies with the law enforcing machinery. It is time for the professional organisations in nursing to recover from the state of inertia and enact legislation and effectively implement it to safeguard the interests of the nurses.

Let us also help ourselves to build an excellent network of quality services of nursing care.