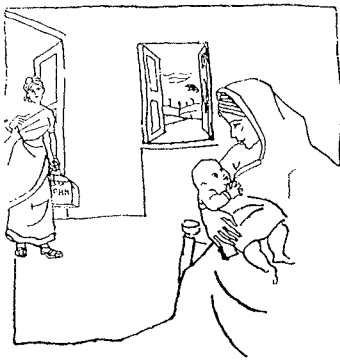




Every Nurse a Public Health Nurse

By

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EVERY Nurse, a professionally qualified public health nurse" is the present trend in nursing. The modern concept of health goes beyond the idea of prevention (which is mere absence of disease) to include health promotion which aims toward the highest level of health possible for man within the limitation of his environment. The scope of public health nursing has broadened and deepened with advances in the behavioural sciences. Now there is an increasing realisation of the effect of socio-cultural and psychological factors on the well-being of the patient. An awareness of the need for treating the whole person has led to the development of the modern concept of comprehensive nursing care. Thus, effective public health nursing necessitates a wide range of scientific knowledge, technical skill, and a realistic application of knowledge and skill within the cultural and socio-economic structure of the community.

From my own experience in the field of public health nursing for two years as a staff, I am proud to say that for a qualified nurse, this service gives challenging opportunities for initiative and independent thinking and judgment for planning and accomplishment. She can broaden her general knowledge and is rewarded by the satisfaction which comes from working with all kinds of people. Her work is never dull, for it offers a variety of nursing service including bedside care, health guidance and supervision of other personnel. The work is also satisfying as she has more than usual opportunity to give comprehensive nursing care, meeting the individual's physical, mental and

emotional needs in the real setting of the patient, his family and community. As an illustration I would like to relate a typical experience in connection with a patient in one of the villages. I was on my way to make a home visit when I first met 'M' an emaciated young man of about 17 years old. He was having severe cough with expectoration of blood stained sputum. Seeing me, he wanted to hide himself, but I stopped him and explained the need for immediate treatment on consultation with the doctor. On enquiry I found that he did not have anybody and like a stranger he lived in others' houses. Although Mr. 'M' had agreed to come, he failed to attend the clinic. His condition became worse as days went by and soon one month had passed. In spite of constant persuasion, he was very frightened and never wanted any treatment, thinking that it would do him no good in the late stage. Financial help was of no use. It would have been easy to give up and feel that he was a hopeless case. Gradually he showed some interest in reading some booklets on testimonies of many sick and deserted people who in the long run found faith in God. It was emotional and spiritual help he needed first. What a miraculous change! Though physically weak, he found some hope and requested me to take him to the hospital. He was diagnosed to have bilateral pulmonary tuberculosis and started on intensive treatment. He is getting better and is no more afraid of life. The visiting nurse is a source of inspiration to him. It is really satisfying for one to see the end result after a long hard struggle

of persuasion and explanation convincing him of his condition and the nursing needs.

Caring for the sick at home is only one of the many services offered by the Public Health Nurse. Her ultimate aim is for her patients and families to become better equipped to care for their own health needs. The care she gives is offered on a demonstration basis for the patient and the family. She is mainly concerned with health promotion. For example, one of the purposes of the maternity home visit is the protection of the health of the mother and infant. When the nurse visits a patient with a communicable disease, her function will be not only to make him comfortable, but to initiate and supervise isolation and measures to prevent complications and spread of infection to other members of the household and community. In the tuberculosis control service, home supervision is needed primarily to see about the drug therapy and follow-up contacts. Where there is a school health programme, the nurse is the connecting link between parents, teachers and doctors.

Health education is an integral part of her work. She does this effectively making use of all the available opportunities in the home, clinic, school and other community organisations. On a supervisory level, she is responsible for the professional guidance of students and related auxiliary personnel employed by the same public health agency. She also takes interest and seeks co-operation with other groups working in her locality for the welfare of the community. She has to be very tactful in working with the

staff of other agencies to maintain a good rapport. She may be called upon to act as team leader to direct the work of auxiliary personnel and help to set and maintain standards of nursing practice and to provide in-service training and guidance. In the public health nursing field, nursing students who come for their field experience are individually guided and evaluated. A public health nurse, even staff nurse level is given the responsibility to supervise and guide students in their field experience. Compared to the hospital situation, students are given more opportunities to study nursing problems, family needs and apply the safest and most effective way to meet these with the guidance and help. They have more responsibilities also to observe and do something about many nursing needs other than bedside nursing care, thus demonstrating in fact what is meant by comprehensive patient care.

Though she may work independently as a nurse, she also is an integral part of the community health planning team. Other community organisa-

tions play an increasingly important and active part in contributing to the goals of public health nursing. A qualified nurse ought to be keeping herself up-to-date, in knowledge and applied skill in this changing world, if she is to give complete total care. Increasing demand for care of the sick at home indicates that future needs must be met by :

Making the best use of available personnel.

Developing a nursing plan for each patient based on his needs or anticipated needs rather than waiting until serious problems arise.

Greater emphasis on health education aimed at the participation and independence of the family in meeting their own home and community health needs.

Developing nursing records designed to evaluate services rendered for the purpose of improving the quality of work.

Better referral system for early diagnosis and continuity of nursing care, between the hospital or clinic and the home and community.

These measures mentioned above would ensure better distribution of public health nursing service and prevent continuing service beyond the point it is

no longer necessary or effective. The patient's condition may improve to the point where the family is able with guidance to assume responsibility for further care. Since there is tremendous shortage of personnel, we need to be selective and confine ourselves to those who are not only in need, but interested in our service as well and also in regular medical supervision. The most effective and hence wisest use of the public health nurse's time is to concentrate extra care and attention only on those who show interest and follow the instructions until they are able to help themselves.

At present all nurses have a responsibility to help meet the Nation's demand in prevention and curative work. Public Health Nursing offers many challenging opportunities. It is up to each one of us to select what we think is the most suitable field of nursing for our future work. But whatever field of nursing we choose, whether institutional or in the community, public health is part of every nurse's job. So "Every nurse is a Public Health Nurse".

NEWS . . .

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Thirty-four Nationalities on Staff of London Hospital

The nursing staff of Claybury Hospital in Woodford, Essex, near London, has representatives of 34 different nationalities on its staff of 566.

Nurses on the staff come from all corners of the world—from far east to far west, from Finland in the north to Australia in the south.

The 2,000-bed hospital uses the most progressive techniques in the treatment of mental illness and has employed overseas nurses for over eleven years.

Matron Miss Vera Darley has succeeded in welding her multi-racial staff into a team capable of operating these new techniques effectively.



Photo shows seven of the staff — all from widely separated parts of the world. They are (L. to R.) Staff Nurse Bagchi from Ranchi, India, Nurse Bissinger from Poland ; Nurse Mapp from St. Andrews, Granada ; Nurse De Paul from Torino, Italy ; Nurse Besse from Ajaccio, Corsica ; Matron Miss V. Darley ; Nurse Pranic from Novskor, Yugoslavia, and Ward Sister Pledger from Rastenburg, Germany.

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