Tactics to handle Nursing Crisis in India

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ARTICLE INFO

Article History:
Received 10 May 2014
Received in revised form 17 May 2014
Accepted 29 May 2014
Available online 1 June 2014

Key words:
Nursing, Crisis, Skill, brain drain.

ABSTRACT

The rate at which we are losing our highly skilled and experienced nurses to European and Gulf Countries is increasing every year which is in turn worsening the health sector of our nation. It’s not only the nurses whom we are losing. We are also losing our Doctors as well, who seem to enroll themselves in nursing schools offering an abbreviated course for doctors to become nurses, which may aid them in migrating to their long awaited foreign land to start their career.

Introduction

The rate at which we are losing our highly skilled and experienced nurses to European and Gulf Countries is increasing every year which is in turn worsening the health sector of our nation. It’s not only the nurses whom we are losing. We are also losing our Doctors as well, who seem to enroll themselves in nursing schools offering an abbreviated course for doctors to become nurses, which may aid them in migrating to their long awaited foreign land to start their career.

When we tried to skim through the reasons for such a crisis in the health sector of our country, a few interesting facts were discovered. The foremost reason is that there is an acute shortage of nurses in the countries mentioned above and the need will not be for just a year or two but for the next 10 to 15 years. So it will no longer be a roller coaster demand for foreign graduate nurses in the developed countries. These developed countries of the world are experiencing longer lifespan and a constant increase in geriatric population which creates a huge demand in terms of health care personnel.

These factors create increasing pressure on their health systems for greater response mechanisms to the health problems of a growing proportion of the elderly. Moreover the youth population of these countries is no longer interested in the nursing profession due to relatively difficult and riskier working conditions such as evening duties, care of chronically ill and exposure to infectious diseases such as HIV, Hepatitis etc. Thus there is a great demand for foreign nurses.

The Reason for Crisis in India

India will never be able to compete with the pay scales of nurses in these developed nations. The basic pay for an average nurse over there is US$3,000 – US$5,000/Month, compared to the US$150 - US$250/Month here in India. Hospitals in USA and other countries even offer additional attractive benefits like resident visa for nurses, their spouse and children plus other perks like subsidized housing and transportation along with free education for kids, whereas such terms like perks, housing facilities etc are fixed only for the IT Professionals or the Government employees here in India.

Apart from the above mentioned reasons, there is also a proliferation of nursing schools, which has compromised the quality of nursing education provided to the nursing students, and also the compromise made by the nursing schools in setting the intake criteria to fill the seats available. Gone are the days when the students opted for nursing just because they missed medical admission due to borderline variation in marks. Now-a-days, nursing has

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A nursing registry is a corporately run human resource development program that offers nurse practitioner postgraduate courses. This program gives autonomy to nurses in practicing specialties such as cardiac care nursing, neurology nursing, etc. A commission should be established to regulate the production of nurses focusing on various nursing specialties. There can also be fellowship programs centered on sub-specialty nursing in secondary and tertiary hospitals for nurses. Nurses should be provided with three-year residency training in the profession.

Sixth: Expand Nursing Residency and Nurse Practitioner Training Programs:

The government or private sector and will also ensure equal employment opportunities to all the nurses trained inside India. It has made it mandatory for this act to get into existence. With the globalization and active trading of health resources and the inevitability of the severest brain drain to hit anywhere within the country for a number of years equivalent to the number of years it took for them to get graduated. Services Act. According to this Act there is a compulsory requirement for all licensed health professionals to serve 3-5 years, its major tasks should include: an intensive review of the past, current and future scenarios of nursing; completion of a database of Indian Hospitals/Health Human Resources; Unifying the remunerations rendered to the nurses throughout the country irrespective of whether the nurses work in the private or government sector and development of a unified health human resource development policy and a national policy research agenda on health human resources.

Seven Strategic Solutions

This national crisis in nursing is a very complex issue requiring strategic thinking, multi-disciplinary approaches and long-term goals. Since the problem is both global and national in scope, it also requires solutions that are global and national in nature. A Win-Win strategic solution between the Indian and the countries importing nurses must be the ultimate goal in dealing constructively and resolving the crisis in nursing and medical human resource development.

One: Formulating unified health human resource development policy: Initially, through a Presidential Executive Order, and later as a legislative act, A National Commission composed of leaders from the Executive and Legislative branches of the government with participation from the private sector, academic and civil society groups involved in nursing should be organized. With budgetary support and a lifespan of 3-5 years, its major tasks should include: an intensive review of the past, current and future scenarios of nursing; completion of a database of Indian Hospitals/Health Human Resources; Unifying the remunerations rendered to the nurses throughout the country irrespective of whether the nurses work in the private or government sector and development of a unified health human resource development policy and a national policy research agenda on health human resources.

Two: High-Bilateral Negotiations: Led by the team composed of Secretaries of Department of Foreign Affairs (DFA), Department of Labor and Employment (DOLE), the National Economic Development Authority (NEDA), the Commission of Higher Education (CHED), Department of Trade and Industry (DPI) and Department of Health (DOH) should involve in bilateral discussion with the Countries importing Indian Nurses which will center on a partnership approach between the Indian nurses and these countries. The current approach to the importation of Indian nurses by these developed countries has been advantageous only to such countries while India continue to wallow in poverty, underdevelopment and inadequate health care. So the negotiations should be centered towards obtaining aids from these countries so as to increase the financial assistance to continuously train globally competitive nurses, constantly upgrading nursing education, nursing health services and nurses’ remuneration and offering nursing scholarships. Such aids will eventually benefit both countries.

Three: Hospital Partnership Agreements: While bilateral country negotiations are on-going and the financial aid packages for nursing development eventually regularized, the hospitals in developed world should get into an agreement with the hospitals in India. Such agreement should focus on provision of financial grant given by the hospital of developed world for every Indian nurse that enters into it as a staff. The said financial grant will go to the Nursing Development Trust Fund of the Indian Hospitals/Nursing School, to improve nurse salaries, training and nursing practice, upgrade hospital and educational facilities and nurse scholarships.

Fourth: National Health Services Act: India is one of the few countries in Asia that does not have a National Health Services Act. According to this Act there is a compulsory requirement for all licensed health professionals to serve anywhere within the country for a number of years equivalent to the number of years it took for them to get graduated. With the globalization and active trading of health resources and the inevitability of the severest brain drain to hit India, it has made it mandatory for this act to get into existence.

Fifth: Establish Indian Nursing Registries: A nursing registry is a corporately run human resource development center that provides hospitals, clinics and other health facilities with their nursing needs. It has management mechanisms that efficiently locates and monitors nursing human resource availability. It actively negotiates for better remuneration and benefits, better working conditions, keeping always nursing welfare high in its agenda. This council will help to maintain uniqueness in the profession all through the country without any discrepancies between nurses working in the government or private sector and will also ensure equal employment opportunities to all the nurses trained inside the country.

Sixth: Expand Nursing Residency and Nurse Practitioner Training Programs: It should be implemented at all secondary and tertiary hospitals for the nurses. The nurses should be provided with three-year residency training focusing on various nursing specialties. There can also be fellowship programs centered on sub-specialty nursing such as cardiac care nursing, neurology nursing, etc. A commission should be established to regulate the production and development of these nursing residency and fellowship training programs. Another nursing development program is the offering of nurse practitioner postgraduate courses. This program gives autonomy to the nurses in practicing their profession and improves the scope of nursing.
The above-mentioned developments in nursing education will become venues for nurses to comply with the National Health Services Act without neglecting their professional growth. These changes will also ensure better nurse holding mechanisms to maintain a steady pool of nurses to stabilize nursing care in our health care delivery system.

**Seventh: Create the National Council for Nursing Concerns:** This will be composed of all the major national organizations involved in nursing. The possible functions of this national council are: to develop a 10 year strategic plan for nursing development in India, to act as an oversight body for the implementation of all nursing policies, legislations and regulations; to be the locus for the national data bank on nurses and nursing; to be the national sounding board for all nursing issues and concerns; and to coordinate all efforts in uplift and upgrade the nursing profession.

Thus to conclude, even though we have a number of nursing related organizations functioning in our country both at the state and national level, we are in utmost need of having framed few newer organizations so as to have a problem centered approach and to derive newer solutions to overcome this fatal crisis of brain drain.

“Let’s Act Today to Save Our Future”

**References**