

VISION FOR THE FUTURE OF NURSING

Editorial

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'n many ways this is a time of chaos within health care systems around the world. The economic downturn in the global society has impacted on health care. In many places services have been cut and access to services reduced. In addition, new diseases such as AIDS, SARS and the threat of bio-terrorism have entered our lives. New technologies and treatments occur rapidly, but are often expensive, and financing these advances can be difficult. Patients are moved out of hospital rapidly, and those that remain are more acutely ill than they have been in the past. Those discharged patients often need more assistance at home and in the community than in previous years, and those services can also be expensive. Nurses are a vital part of the health care scene, but nursing shortages have appeared in many areas, shortages that are predicted to worsen over time.

Chaos theory talks about dissolution of old patterns and development of new. The nursing profession needs to begin to recognize new trends and patterns that are emerging in health care. Change theory tells us that unsettled a time, a form of unfreezing of old patterns, is also an era of opportunity. Changes are inevitable, and both nursing and especially nursing education are in an excellent position to lead rather than follow. But that is not easy. It takes energy, ideas and commitment.

This is our time of opportunity! It is crucial that nurses become involved in the political process and that we teach our students and future leaders how to do that. It is crucial that nurses learn to collect data to document health care needs and our impact on the health of our societies. Nurses must learn how to identify those health care needs of patients, families, communities and societies; to communicate those needs to policy and decision makers and not allow those needs to be lost in the frenzy of cost cutting options. It is crucial that nurses learn to generate new ideas for care, utilizing the new medical and communication technologies that are blossoming daily, but also keeping our high touch together with the high tech. It is

crucial that nurses learn the terminology of finance and business concepts that are driving health care systems today and generate those new ideas for care with fiscal responsibility, and seeking new ways to lower costs. It is crucial that nurses learn about implementation strategies for those ideas. That we learn to deal with opposition, and that we can present our arguments well; that we learn to develop coalitions and a supportive constituency; that we learn to compromise in ways that develop win-win situations and that we learn what we can give up and what we cannot. These are major challenges for nurses and nurse educators today and in the future.

Nursing educators have a major responsibility in this arena and need to be aware of and responsive to new trends and changes in the health care milieu. They and the students they prepare should be a portal through which this information is communicated to nurses in the field, who often don't have sufficient resources or time to keep abreast of new developments. Although strategic planning can be used to develop nursing practice and educational programs of the future, in today's world change is coming rapidly, and those strategic plans cannot be static. Practicing nurses, nurse administrators and nurse educators must respond to changes quickly, as well as being proactive, based on recognition of trends and external environmental dynamics. The following trends are particularly important to monitor and develop methods to favorably impact their course over time to ensure quality health care:

1. Rapid changes in health care technology and therapies likely mean continued lowered acute care stays. Driving forces include increasingly sophisticated surgical technologies that are less invasive and promote quicker healing. New therapies may reduce sick time, hopefully even in areas such as cancer, HIV/AIDS and genetic disorders. Communication technology has also changed dramatically. However, as those technologies have

prolonged the life span, reduced mortality has changed fatal illness into more chronic illness, which may still require care and control. The growth of telemedicine, telenursing, and telehealth will also change the way we function, and have great potential and challenges for the development of new nursing roles. Restraining forces however could include the reduction of research funding, as we deal with the current fiscal crisis, and which may slow potential advances. With lowered acute care stays, many more people will require care in their own communities. Nurses need to be better prepared to work within this area; financial issues of care provision need to be addressed and nurses need to be better prepared to work with chronic care needs.

- 2. Demographic trends, epidemiological trends, and health care statistics help us recognize health care needs for society and give information for future planning of cost effective services. Increasing life span is a driving force for the development of improved services for the elderly. End of life care has received more attention over the last few years, but nursing research into this area needs to be further developed and findings disseminated. In many societies immigrant issues have created the need for better cultural understanding of health care needs and require resources for care.
- 3. **Flow of resources**. Where is the money going and where is it likely to go? Money flowing into health care in the community will be a driving force for changes in that area, but a blocked flow will be a restraining force to preventive health care services. Nursing input and political power can impact that flow to provide effective health care programs and services.
- 4. Supply of manpower and competition. Manpower shortages or surpluses in health care professions impact the utilization of nurses and advanced practice nurses. Who are our competitors for delivery of services and resources? This is a particularly important area in a time of nursing shortage to be sure that less qualified health care workers are not used to substitute for the sake of expedience and reduced costs. How can we develop competitive and marketing strategies? How can we form coalitions to reduce competition? At the same time we need to explore whether more collaborative programs of care can be developed effectively, so that we are not holding on to outmoded ideas of the profession but can develop newer modes, such as nursing, practice advanced to work interdisciplinary collaboration. Collaborative rather than competitive strategies can strengthen quality of care by better utilizing the expertise of each participant.
- 5. **Role delineation, role confusion**. Are the jobs keeping up with the expectations of nurses and with advanced practice nursing? How are support

worker jobs defined? How do professional standards interact with reality? How many people are required to do the job? Can one person realistically do the job? How can job satisfaction be increased in this era of high stress in the workplace?

6. **Public opinion**. Nurses need to be aware of the

public perception of their role. Development of coalitions and supporters within communities and media can be a driving force for advanced nursing practice. Consumer or professional opposition can provide barriers to practice, and be a restraining force.

7. *Global trends*. We are a global economy and health care services face similar problems internationally. We can learn and benefit from contacts in other countries, and we can offer our services when appropriate to improve overall healthcare in both developing and industrial countries. Global terrorism needs to be addressed, and nurses need to be well prepared to deal with the

aftermath and to document it's effects on those we

care for. Nurse educators need to incorporate disaster

training and stress counseling into the curriculum and

to provide workshops in this area for nurses already in

practice. It is essential that nurses participate in the

political process to reduce this threat.

8. *Nursing practice and theory*. Nursing research and theory development need to be supported and findings disseminated to continue to build our nursing science and incorporate the results into practice. We need to increase our core of nurses who have met high academic standards for carrying out research and provide resources for their activities. Nursing research and theory also have the potential to contribute to the body of knowledge of other disciplines in the same way that we have borrowed from other theorists to use in our practice. The role of advanced practice nursing has been growing and has demonstrated effectiveness in the health care system. These nurses are now able to provide medical expertise in diagnosing and treating specific conditions, but are not mini-doctors. The medical portion of their practice is only one tool within their whole tool box of nursing competencies for use in providing holistic **nursing** care and health education. That combination has the potential to strengthen the provision of health care around the world.

These trends are not all inclusive. It is my hope that this discussion will stimulate you to elaborate on the areas mentioned, and explore other trends and needs that have not been included, especially those that may be more specific to your own field of practice. Your expertise needs to be shared with others. Many nurses working together on these issues can benefit many people. Society and the nursing profession need your input.