

MANAGEMENT ANALYSIS REGARDING THE DEVELOPMENT OF PROFESSIONAL COMPETENCIES OF GENERALIST NURSES

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***ABSTRACT:** Through the theoretical research formulated and carried out, the present scientific approach is in the field of national concerns and not only, for increasing the quality in the training of generalist nurse and awareness of the importance of the profession in the context of health management. The results of this scientific approach highlight those positive aspects, accumulations and examples of good practice, which must be exploited, but also the weak aspects identified in shortcomings, deficiencies, negative aspects and which must be eliminated from the practice of organizations providing medical services and those professional deformation.*

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1. INTRODUCTION

The main global problem of healthcare, that of lack of human resources can be solved starting from the promotion of the profession itself. In order for this to be promoted, a compliant salary is needed, but especially an instructive-educational system that emphasizes the idea that nurses are not just professionals who perform the medical act, which in itself is an overworked process and with a degree high risk, but their role is a creative and constructive one through which they support the entire medical system to develop, are respected and benefit from all the conditions to be able to practice, contribute and research. This area is recognized as a priority in the context of globalization and the full manifestation of the society based on knowledge and innovation.

2. CONCEPTUAL ANALYSIS OF THE MAIN TERMS REGARDING THE MANAGEMENT OF THE DEVELOPMENT OF PROFESSIONAL COMPETENCIES OF GENERAL ASSISTANTS

The sole function of nurses in caring for sick or healthy individuals is to assess their responses to their health and to assist them in carrying out those activities that contribute to the development of their health or their recovery. (Zuzelo, 2020) training in the field of healthcare must thus take into account the future of the profession (Hunt, 2014)

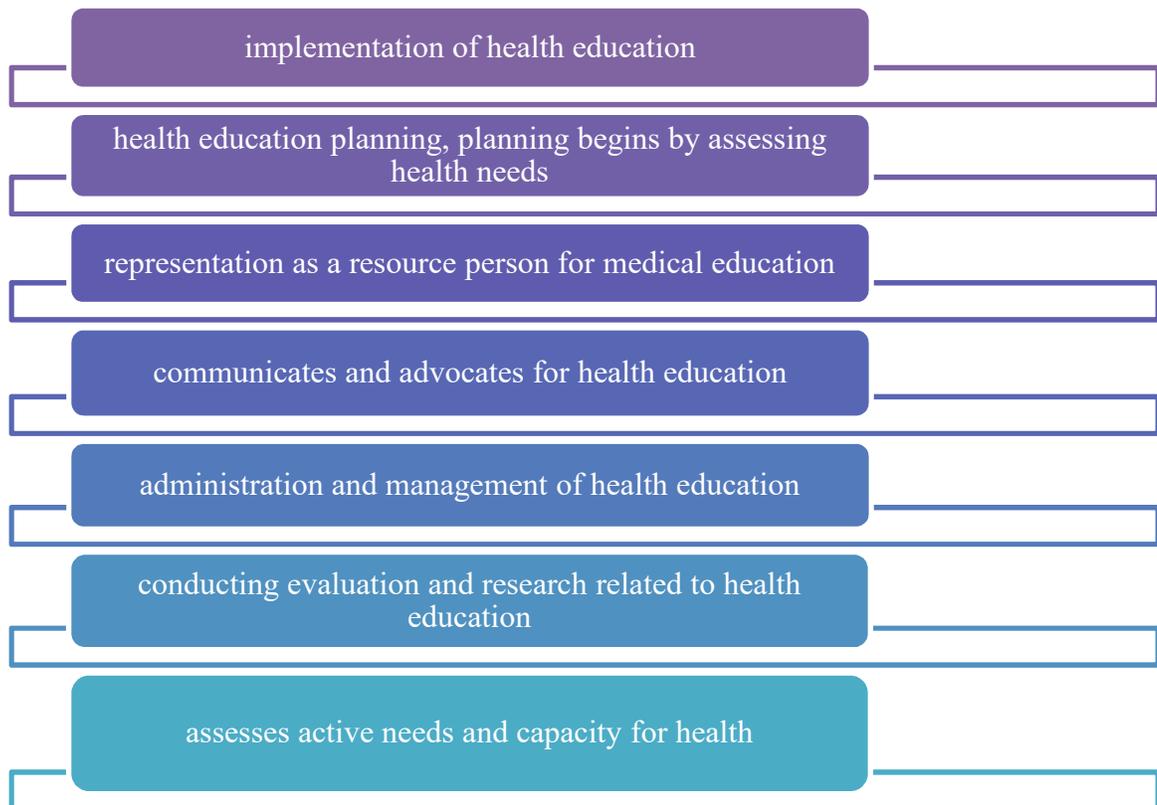
Previous steps on the chosen topic have been made by the American Medical Association or the World Health Organization (WHO), but these organizations have chosen

to address only general guidelines on the future of nurses, and not to try a multidisciplinary approach. The care provided by nurses is the main criterion that patients use to measure the quality of care in hospitals. (Kelly, 2007)

The instructive-educational process refers to a formal learning program that takes place before and as a precondition for employment in the medical system for general nurses. (Ayala, 2020)

The proposals in the field of the instructive-educational process of nurses should be based on more areas of responsibility:

Figure no. 1: The main areas of responsibility



Source: Own projection

As clinical leaders, general nurses work in the healthcare category and can influence the delivery of health services and the profession in general. (Dyson, 2018)

The report's message is clear: governments need to invest in a massive acceleration of healthcare education, job creation for healthcare and leadership. Without nurses, midwives and other health workers, countries cannot win the battle against outbreaks, as the recent case of the COVID-19 pandemic has shown.

In order to provide the workforce that the population needs, WHO and its partners recommend to all countries:

- increase funding for the education and employment of more nurses;
- strengthening the capacity to collect, analyze and act on data on the health workforce;

- monitoring the mobility and migration of nurses and managing the process responsibly and ethically;
- educating and training nurses, developing their scientific, technological and sociological skills that they need to drive progress in primary care;
- establishing leadership positions, including at government level, and supporting the development of leadership among young assistants;
- ensuring that nurses in primary care teams work to their full potential, for example in managing the process of disease management and prevention;
- improving working conditions, adequate pay, respect for nurses' rights to health and safety at work;
- implementation of gender-sensitive labor policies;
- modernization of professional healthcare regulations by harmonizing education and practice standards and the use of systems that can recognize and process nurses' accreditations globally;
- strengthening the role of nurses in care teams by bringing different sectors (health, education, migration, finance and labor) together with health care stakeholders for political dialogue in order to increase the capacity of the workforce.

3. MANAGEMENT ANALYSIS REGARDING THE DEVELOPMENT OF PROFESSIONAL COMPETENCIES OF GENERALIST NURSES

The results of this scientific approach highlight those positive aspects, accumulations and examples of good practice, which must be exploited, but also the weak aspects identified in shortcomings, deficiencies, negative aspects and which must be eliminated from the practice of organizations providing medical services and those vocational training, in Romania.

Strengths

- the positive quantitative evolution of the total number of nurses and midwives in Romania, the number reported per 100,000 inhabitants, Romania being in the middle of the ranking;
- organization at national level under the auspices of a single representative body: the Order of General Nurses, Midwives and Nurses in Romania (OAMGMAMR);
- the existence of professional standards, of the deontological and ethical code;
- the current involvement of WHO and the International Council of Nurses (ICN) in the field of nurses, by conducting studies on the current state of the field of healthcare;
- academic partnerships, as well as collaboration with public actors for the practical specialization of nurses;
- EU efforts to standardize healthcare practice and curriculum at EU level;

Weaknesses

- the focus of the healthcare education system on the training of secondary school nurses, being the EU country with the highest number of secondary school graduates in the field of healthcare;
- the distribution of expenditures in the health system, less than 2% being allocated to health care services, compared to the European average of 5%;
- poor country rating on the quality of nursing education (5 out of 9);

- the shortage of nurses on the labor market, the overcrowding of some health systems;
- the membership of ICN does not imply the observance of international standards regarding the quality of the medical services provided or the level of education and professional qualification of the nurses in each country;
- different curriculum and requirements at global level regarding the accreditation of general nurses; reporting statistical data;

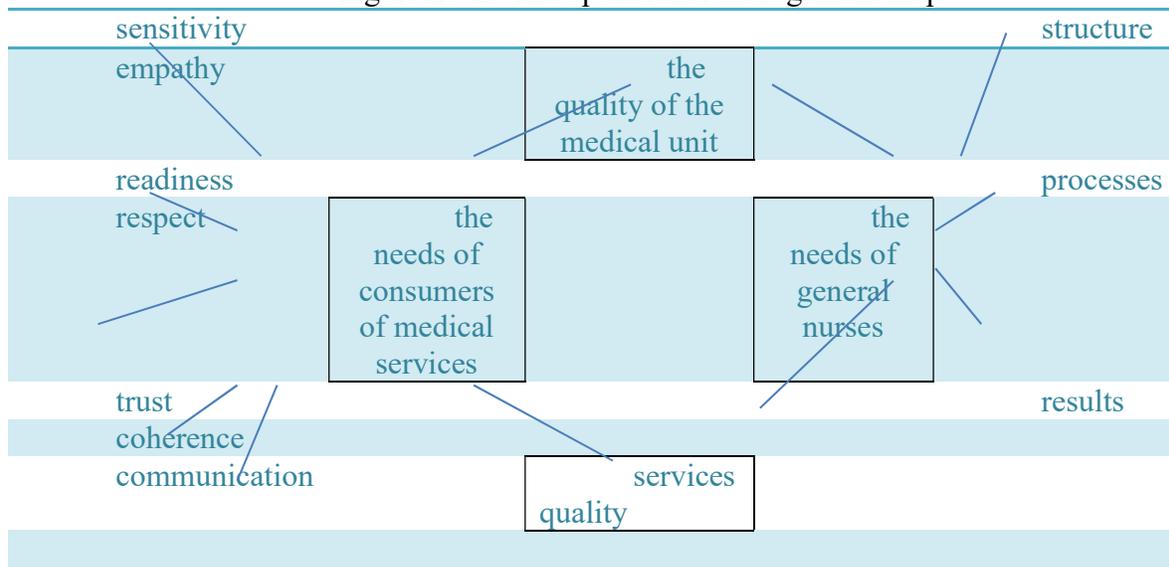
Opportunities

- the increase by over 100% in 2018 of the remunerations from the health system;
- increase in expenditure on
- increase in expenditure on hospital services from the budget allocation;
- development of the system of continuous medical education, for the over-specialization of nurses;
- the development of a unitary curriculum in the field of healthcare at international level that conditions the status of a member of the WHO or the ICN;
- the development of an international body to periodically check compliance with standards in the field of medical services provided, as well as to periodically check the professional skills of nurses;
- creating standards for in-hospital processes with a view to improving them;
- developing leadership qualities at the level of the health unit;
- development of new models for managing in-hospital processes and inter-professional cooperation through advanced technology;

Threats

- the decrease in the number of graduates with higher education in the last three Eurostat statistics; only 1 in 19 annual medical graduates is a graduate;
- uneven distribution of medical staff in Romania, the number being twice as high in Bucharest and the West, Center and North-West regions compared to the rest of the country;
- reduced spending on health prevention;
- the effects that the shortage of nurses on the labor market could have on the decrease of the quality of the medical act and of the medical services provided, the increase of the mortality rate;
- abuse and violence in the workplace can lead to a decrease in the number of general nurses;
- cultural diversity which can lead to discrimination and, implicitly, lead to a decrease in the number of general nurses;
- migration of the workforce in the field of healthcare, from the Eastern Mediterranean area, the number of generalist nurses with higher education in these areas being below 30% of the total number of nurses;

Figure no. 2: The operational management map



Source: Own projection

It is important that in their approach, nurses also consider the entire medical process itself, so that they can create an operational map of their work, in order to improve the medical act. (figure no.2)

4. CONCLUSIONS

Collaboration is essential among health units. Actions on curriculum development in the field of general nurses include cross-sectoral dialogue between ministries of health and education and heads of nurses, as well as the involvement of other relevant ministries and public and private sector stakeholders. A key element is to strengthen the capacity for efficient public policy management, so that private sector investment, educational capacity and the roles of nurses in the provision of health services can be optimized and aligned with public policy objectives. Healthcare professional associations, educational institutions and educators, regulators and trade unions, student groups, all are valuable contributors to strengthening the role of nurses in care teams working to prioritize public health.

Therefore, remuneration should be fair and adequate to attract, retain and motivate nurses. Furthermore, countries should prioritize and implement policies to address and respond to the sexual harassment, violence and discrimination that nurses face in the pursuit of their profession.

While the emphasis is on disease prevention and individual well-being, technological solutions can help identify and diagnose health risks earlier, leading to preventive and effective interventions and a reduction in the burden and expense of health. Technology can therefore help remove barriers to care, ensuring equitable access for all. The benefits can be particularly pronounced for some marginalized segments of society.

As healthcare becomes person-centered, its consumers will be actively involved in the care team. Full access and control of one's own data can contribute to consumer involvement and empowerment, which in turn can lead to better quality of health services.

Human-centered design principles can improve the care experience for everyone: patients, providers (doctors) and caregivers (nurses). As the practice of nurses, in which it is expected to measure patient outcomes and adopt evidence-based practices, healthcare education will be tested to develop outcomes and adopt evidence-based education. Passive learning, using the traditional format of conferences will be replaced by critical thinking exercises that address simple or complex practical situations, independent decision-making and creative problem solving. In addition, a reconfiguration of evidence-based teaching and learning will be needed as part of the accreditation process (thus there is a need to increase the importance of practical learning programs).

The educational units will be involved in the evolution of the medical system and from the perspective of assessing the students' ability to respond to changes in patient requirements. Although the use of simulation is fairly new in practical medical education, technology is advancing and this trend is expected to continue. A challenge for caring students, which is unique to the use of the virtual environment, is the process of meeting patients' avatars in the virtual environment and interacting with patients who are not physically present. The visibility of the patient's avatars on a virtual environment can be very different from that which involves the on-site analysis of the patient, touch and interaction with him. The concept of the virtual world of patients puts nurses in front of new problems such as the use of technology to improve the practice of nursing students.

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