Greetings from Singapore
Ensuring The Global Nursing Workforce

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Role of Nurses in Health

- Nurses make up the largest group of health care providers
- The services are essential to the provision of safe and effective care
- A vital resource for sustain of health of the population.
Global Nursing Similarities

Managing health and illness

Nursing shortage
Healthcare Today

- Healthcare evolving into a complex system that contains multifaceted care
- Many are facing pressure to restructure its healthcare system to contain costs
- Longer life expectancy and aged population
- Hospitals are reshaping system to achieve better outcomes and quality service
Appropriate planning and management of the healthcare workforce is fundamental to achieving and maintaining a well-functioning health system.
National Millennium Development Goals (MDGs)

- Adopted in 2000 by 189 Member States
- Represent 8 goals and of these 3 are directly related to health:
  - Reduce infant and child mortality rate
  - To reduce maternal mortality
  - Halt and reverse HIV/AIDS, TB and malaria epidemics
Factor Hinders the fulfillment of MDGs

- Inadequate investments in health human resources
- Ineffective actions to develop and sustain in appropriately prepared, equitably deployed, well-motivated and well-supported health workforce
The Challenges of Nursing Today
Evolution of Nursing

Meeting changing healthcare needs

- Role change or expansion e.g. APN, CNS etc.

- Changing skills - managing new specialties e.g. case coordinator, quality management, research etc

- Healthcare delivery focusing on evidence-based practices
Educational and Professional Requirement

• Increase in complexity of healthcare cause a higher level of education and skills need:
  ➢ Advances in technology
  ➢ Higher expectations of patients
  ➢ Change in the disease trend

• Nursing Governance/regulatory bodies envisaging the need nurses be better prepared and is advocating for baccalaureate level
Managing Changing Need

• New perspective—constant drive to review and abolished of non-value added process e.g. quality improvement initiatives

• Close collaboration with other healthcare providers – role less defined and often cross boundaries
• Health care information technology will change how patients access
• Inpatient settings become more technological based, ICUs are staffed by clinical and technical experts and nurses are immersing into their roles
Introduction of New Cadres

- Introduction of new grade of nurse, clinical, operational and assistive personnel - rising demand for health services
  - Cost containment
  - Shortages of nurses and other healthcare workers

Adverse impact: decreased in quality of care, higher workloads for RNs and high turnover rates
The Impact of Globalization
Global Shift in Nursing Labor Market Trend

- Geographic locations – aviation accessibility allows movement of nursing workforce globally and seeking of employment elsewhere
- Nurses leaving traditional bedside nursing jobs
- Changes in employee’s work ethic
- Inequity of supply and demand – causing nursing shortage
Economic and Social Impact on Job Market for RN

Economic:

• Curbing of Healthcare Cost – multi-tasking

Social:

• Family work-life balance – demand for improvements and scheduling flexibility
• Recognition
• Migration of nurses
Migration of Nurses

Reasons for embracing cross borders opportunity:

• Better pay
• Career advancements
• Better working conditions
• Search for better quality of life
Movement of Nurses from Developing to Developed Countries

- Globalization
- Liberalization of trade
- Accessibility
- Efficiency of communication system
- Active recruitments by countries with shortage
Status of Global Demand

Great demand for experienced nurses with diverse clinical backgrounds in specialties such as:

• Operating Room
• Emergency Department
• Intensive/Critical Care Unit
• Pediatric
• Labor Delivery
Status of Global Demand During Pandemic Outbreak

Severe Acute Respiratory Syndrome (SARS)
- Mortality: 14%
- Severity: ICU care

Avian Flu (H5N1):
- Mortality: 
- Affecting children
- Severity: ICU care
Health Resources and Service Administration (HRSA) reported in 2002 highlighted:

• Widening gap between supply and demand in the coming years

• Shortage of full time RNs which previously predicted to begin in 2007, was already manifested itself in 2000

• By 2010, the shortage will double from 6% to 12% and reach 20% by 2015 if nothing is done
Key Nursing Workforce Issue

- Key agendas of governments and healthcare institutions
- Key theme of the Commonwealth Health Ministers Meeting in Barbados in 1998
- Key concern: Migration of nurses and doctors which cause great impact health of the people in home country
Factors Contributing to Nursing Shortage

- Healthcare delivery system – greater acuity and diversity which put stress to existing pool of nurses who may experience the lack coping power to accept change
- Increased career opportunities
- Increase in the age of RN workforce
- Decreased in nursing school enrolment due to the nature of work and schedule
The quality of nurses’ practice environment has been linked to issues of job satisfaction, motivation, productivity, performance and patient outcomes.

Poor quality of work environment – recognized as being the greatest factors contributing to the global challenge of attracting new recruits and retaining existing ones.
Factors Impacting on the Quality of Work Environment

• Inadequate staffing
• Heavy workloads
• Overtime
• Inflexible scheduling
• Exposure to occupational hazards

• Violence and abuse
• Lack autonomy
• Poor HR management practices and leadership
• Poor career development opportunities
New diseases evolve with no prior warning, unknown to healthcare workers which added risk to healthcare workers

SARs outbreak in Singapore – 2003

- 76% acquired disease in hospital
- 41% healthcare workers got infected
- 5 healthcare workers died
Ensuring Global Workforce

• Image
• Recruitment
• Retention
• Education and Development opportunity

• Global collaboration in promoting the sharing of expertise and join development nursing program
Freed the tradition virtue script of nursing identity as altruistic and attributes associated with “good women”

Assert its identity as a knowledge-based profession that is critically important to patient care and influential to quality outcome

Project nursing as a profession grounded with science, technology and complex nursing skills acquire thru’ education and experience
Improve Workforce Planning System

- Nursing has traditionally relied on recruiting from a narrowly defined group of school leavers (ICN 2004)

- Recruitment net to include a broader range of applicants including “mature entrants”

- Singapore- Strategic Manpower Conversion programme (Healthcare) – assists mid-career switch with a 2-year full-time Accelerated Diploma in Nursing
Nursing Education

• Using curriculum based on the knowledge, skills and competencies needed to practice in their role

• Review and reorient nursing education to ensure the curriculum is relevant to health service needs and sufficiently flexible to meet future service demands
Raise public awareness of the nursing shortage and increasing advocacy within the profession by:

- Supporting legislation that addresses the shortage
- Flexible curriculum to meet the needs of older students and those considering a career switch
Lack of faculty workforce would reduce the ability of education providers to increase their intake of applicants to meet future demand.
Nursing Enrolment: Singapore Experience

• Extensive media coverage on the work of healthcare workers during SARs outbreak

• Assert its identity as profession that is critically important to patient care and saving of lives.
Nursing Enrolment: Outcome Achieved

Singapore Nursing Enrolment

- Post SARs
- Mid Career switch

No. of Enrolment

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Recruitment – Reality

• The resources spent on recruitment often takes precedence over the retention of highly skilled and knowledgeable nurses already employed by healthcare facilities.

• Facing with global reach of nursing shortage, the tendency of hospitals of developed countries often turned to international recruitments.
Recruitment of Foreign Nurses

- Short-term viability strategy for building and sustaining workforce
- International Council of Nursing (ICN) has calls for a regulated recruitment process based on ethical principles and sound employment policies and practices
- Code of Practice for international nursing recruitment to guard against nurses being exploited
Major Concerns over International Recruitment

- The ease in immigration law to attract foreign nurses
- Taking nurses away from countries that are struggling to provide care to their own people – CNN, 9/2/07 – Philippines loosing their nurses and impacted on healthcare delivery system
- Deteriorating of working conditions
- Language and care standards
Retention Strategy

Factors influencing job satisfaction:

• Professional status
• Remuneration
• Work requirements
• Administrative style and policies
• Social integration
Role of Nursing Leaders in Retention Strategy

Manage factors influencing job dissatisfaction:
• Flexibility of work schedule
• Nurse-to-patient ratio – establishment a system to determine appropriate nursing staff level mix
• Minimize hazards and safety issues in work place
• Increase clinical support staff
• Leverage on technological support
• Empower nurses in decision making in practice issues
Growing evidence suggests the level of education in the makeup of staffing does significantly influences patient outcomes.

The rapid changes in technology, healthcare system, and settings create a need of building upon the fundamental knowledge and skills thru’ specialized training.
Self Reliance

- Self-reliance – Importance of building national self-sufficiency to manage domestic issues of supply and demand
- Developed of structured core-program for various specialties for new recruits in working in specialized areas
- Extensive preceptorship/mentorship
- Additional time for practicing hands-on skills in training laboratories
The ethical dilemmas faced by nurses who care for patients within a poorly resourced system where healthcare is poorly funded

- Low standard of nursing education contributes to poor health statistics and an unhealthy nation would need more healthcare
- Healthcare medically driven leaving nurses with little power to make changes
Sharing Expertise and Development

• Well educated nurses in developed countries with well-resourced health services are fostering expertise and share knowledge and skills to assist the less fortunate counterparts.

• Change can occur with close collaboration and share insight of healthcare development.
Joint Learning Opportunities and Share Technical Expertise

• Global health and financial policymakers should work together to strengthen technical and policy cooperation on nursing resources at the regional and global level

• Country led actions – share expertise and Train-The-Trainer Program

• Foster better cooperation and collaboration through networking
Share Technical Expertise: Train-The-Trainer Program to National Pediatric Hospital, Cambodia
Future Needs

• With changing healthcare delivery systems, nursing shortage would worsen in next 20 years

• Nurses have to drive towards providing scientific based care and continue to involve in organization and work-role strategic planning for achieving maximum health gains for their patients by ensuring sufficient nursing workforce to sustain such work
Creating a Magnet Institution

- The 2002 Nurse Reinvestment Act included provisions for grants to encourage facilities to implement the Magnet approach.
- In 2002, JCAHO recommended the adoption of characteristics of magnet hospitals that “foster a workplace that empowers and is respectful of nurses.
- In 2005, U.S. News and World Report added magnet status to its criteria for choosing the best hospitals.
Positive Outcomes Associated with Magnet Status

- Higher levels of job satisfaction
- Higher overall patient satisfaction
- Magnet-designated organisations reported decreased nursing turnover, resulting in significant cost saving

Mod Healthc. 2002
Creating a Magnet Institution

The essentials of Magnet Institution:

- Positive nurse-physician relationships
- Autonomy
- Clinical competent
- Control over nursing practice
- Adequate staffing
- Support for education
- Nurse manager support
Work-life Balance

- Nurses often leave the profession prematurely due to inadequate/inflexible work policies
- Lack support for nurses seeking career re-entry
- Support family friendly policy - Need to allow career breaks
Monetary Incentives

- Financial incentives are commonest approaches used to improve recruitment, retention, motivation and performance (ICN, 2005)

- Stagnation of nurses wages which made it impossible for nurses manage with living standard thus resulted in seeking 2nd employment

Nurses’ pay to go up by 3-7 per cent this month

THE STRAITS TIMES, SINGAPORE
9TH FEB 07
Non-monetary Incentives

- Indirect financial rewards, such as opportunities for professional development and continuing education, were perceived as positive and motivating (ICN 2005)
- Work autonomy - Participation and make fundamental care delivery decisions
- Career development
Nursing Leadership - Institution

• Effective leadership and management abilities

• Strategic thinking and planning to anticipate the need especially in development of new services

• Staff development and management

• Resource management

• Policy development to ensure safe care delivery and safe work environment for staff
Nursing Leadership – Global Arena

- Understand global governance and finance mechanisms
- Regulation - transparent and flexible enough to reflect the changing work environment and the development of new roles
- Network and build alliances
- Coalitions to politically leverage and articulate the value of nursing with key players in national, regional and international organization
- Influence change
Conclusion

• Nursing services are a vital resource to overall improvements in the performance of health systems and, ultimately, the lives and health of people worldwide.

• Given the health and social challenges facing developed and developing nations, there is no room for complacency in our actions to address the state of the world’s nursing workforce.

The Global Nursing Review
ICN, 2006
Thank You