CHAPTER VIII :

THE NEW DEAL FOR NURSES :

DOES THE PROBLEM EXIST ? :

The answer is, 'Yes.' A careful persual of the report submitted by Mrs. Mohite Committee clearly indicates that much needs to be done for the nurses working in government hospitals, if we are to expect more efficiency on their part in the duties assigned to them. It appears that the profession of nurses is very much neglected. It has taken as if for granted that women join this nursing profession as a last resort. The services rendered by these qualified and trained nurses are also treated as manual services by the bosses as well as patients alike. While much is expected by way of contribution in their services from the government nurses, very little is returned by way of compensation.

It is again not a question of adequate monetary reward for which, by and large, individual nurse as well as the nursing community feel aggrieved. The informal discussion which I had with the nurses as well as the answers given by them to my questionnaire clearly indicate the need for introducing other non-monetary incentives to them. This includes even their psychological rehabilitation. The services rendered by the nurses should be regarded as most
valuable in terms of the relief that they offer to the patients. The study of attitude of the people towards nurses would equally be interesting. But this does not directly form part of this research work. This study was obviously confined to their working conditions and the immediate monetary and physical relief that the nurses expected while carrying out their jobs. In this sense, the study has certain limitations but it is worthwhile recommending here that the study of attitude of the people towards nurses must be carried out independently by the psychologist and the sociologist.

It is, in this larger context as well, obvious that the problem does exist and it is almost a multi-dimensional problem.

The present study was undertaken to assess the quality of working conditions of nurses in government hospitals in Poona. The research worker being a third party other than the Government of Maharashtra, who is the employer of the nurses and the nurses, who work in government hospitals as State Government employees, the study could be objective and impartial. On the one hand, there were rules and regulations made by the employer for the employees. These rules and regulations represented the employer's point of view towards the working conditions of nurses and they largely
controlled the work environment at the hospitals. On the other hand, there was the information collected by me about the working conditions which actually, prevailed in the government hospitals. This was collected through the interviews and the questionnaires supplied to the nurses and through the personal visits to the government hospitals. If the working conditions of nurses here, with those obtaining are compared, abroad and in other parts of the country, the propriety, practicability as well as urgency of the demands made by the nurses could be recognised easily.

Following broad observations were made -

1. The problems of nurses employed in government hospitals are long neglected. If the government had made some efforts to remove them from time to time, they would not have made the working conditions of the government nurses so pitiable. At present there is too much stagnation and accumulation of problems.

2. These problems include not only the problems as regards wages or allowances but also the problems related to so many other things like load of work, nature of work, proportionate number of the nurses to the number of patients, transfers, promotions, job security, personal security and status. It could easily be noticed that the nurses' problems are of
economic as well as of non-economic nature. Economic problems require consideration of the availability of funds with the government but the other problems could have been solved earlier, if the government was careful enough to identify them in time.

(3) Because of the very special nature of the job, the nurses are terribly over-worked. Most of the nurses are women and they have to face equally pressing demands at home of being ideal home-makers, mothers and wives. In this manner, they are doubly taxed, like all other working women in our Indian society. It is essential to look at their problems with more sympathy and consideration.

International standards as regards hours of work for the nursing personnel demand the normal hours of work for the nurses and, in any case, they should not be longer than those set in the country for workers in general. If other government servants have seven hours' duty which includes rest intervals for tea and lunch, the nurses should also have at least similar hours of duty. Taking into consideration the heavy load of work and the very special nature of the job, it is necessary to reduce their hours of work at the level of six hours per work-day. There should be four shifts of six hourly duty during twenty-four hours.
(4) Many nurses work out of economic necessity. An increase in the monetary reward for their work can be a panacea for most of their problems. Salaries being the important determinant of working conditions as well as living conditions of nurses should be carefully reviewed by the government and the pay scales and allowances should be revised properly. The scales of pay recommended by the Bhole Pay Commission, though an improvement on the previous scales of pay, seem to be still unjustifiable taking into consideration the heavy load of work as well as the average standard of living of a nurse. Therefore, it seems that the pay scales should be reviewed and revised once again.

(5) It is necessary to check unrestricted inflow of patients. This necessitates the plan and the implementation of a long-range programme of curative and preventive health care education of the people and supply of timely medical aid to them. If the inflow of patients is out of check, it means that the capacity of the existing government hospitals is insufficient to cope up with the needs of the State. Therefore, the government should immediately explore the possibilities of opening new hospitals.

(6) The number of nursing personnel should be proportionate to the number of patients as suggested by the Indian Nursing Council. More nurses should be employed to bring the
available staff to that level and more funds should be allotted by the government for such additional employment. On comparing the average number of patients in government hospitals with the number of nurses employed there, it is noticed that it is necessary to double the number of nurses employed to deal with such a huge inflow of patients. The government should make necessary arrangements to sanction more posts and see that all the sanctioned posts are actually filled in. As suggested in the Mohite Committee Report, employment of part-time nurses can be a very good solution on the scarcity of nursing personnel.

(7) Nurses are specially trained for taking nursing care of patients. Their knowledge and skill must be fully utilised. At present, it seems it is wasted in performing many non-nursing functions like keeping account of drugs and maintaining various registers. All non-nursing duties of the nurses should be eliminated.

(8) Accommodation should be provided to the nurses at the site of work. The nurses should get free or concessional accommodation, medical aid, travel, telephone which should be provided by the government as ultimately it is going to result in the availability of prompt nursing services to the patients.
(9) Much improvement is necessary in respect of allowances received by the government nurses. As demanded by the nurses' unions, payment of responsibility allowance or charge allowance to Ward Sisters, payment of risk allowance to nurses working in T.B. wards, laprocy wards and in other wards where patients of communicable diseases are treated, and, payment of night duty allowance to all nurses seems to be justifiable. Merger of messing allowance in the basic pay of a nurse, on the lines of Central Government policy about the nursing personnel, also seems to be reasonable.

(10) Nurses working in rural areas face the problem of personal safety more than the nurses working in urban government hospitals. It was reported by the nurses that the male co-workers in the department including the doctors and other influential people caused much trouble to the nurses than the general public. It is necessary that the government implements the security measures recommended by the Vasantrao Naik Committee.

(11) Policy decisions concerning the working conditions and other aspects of the nursing profession should be taken only after consulting freely chosen representatives of nurses or the representatives of their unions. Participation of nurses in decision-making should be encouraged.
In each government hospital, a joint consultative council should be established in which representatives of the government can have a direct exchange of thought with the representatives of nurses so that most of the trivial problems are disposed off quickly.

(12) Free and direct lines of communication should be created and developed throughout the nursing organisation structure. Employee-oriented attitude should be developed in all the supervisors to build up a well-knit work-group in each ward.

(13) Different cadres of nurses should be merged into one State cadre of nursing services, as stated in the Mohite Committee Report.

(14) Existence of two rival unions of nurses is certainly harmful for attaining any improvement in life and labour of the nurses. In order to strengthen the labour movement in nursing profession, there should be only one union of the nurses which would act as a sole representative of the nurses while dealing with all outside parties. But this seems to be, at the moment, difficult.

(15) The nursing profession will grow when all of its members grow individually. Hence adequate educational and training opportunities should be made available to the nurses
by giving facilities, concessions in all respects and effective encouragement. In-service programmes for training should be arranged frequently. The Workers Education Centre in Poona can do much in this respect.

(16) If the nurses are expected to take care of the patients' health, they themselves must be healthy and physically fit to work. They must have good and timely diet and enough rest at proper intervals. So the government should provide them with proper messing facilities and resting facilities.

(17) The rules and regulations as regards the government nurses were formulated long back and they need revision. A post of Director of Nursing should be created so that he can take care of the problems of government nurses.

(18) Responsibility and authority of carrying out the work regarding the nurses' leave pay, increases in pay, service book records, pay in maternity leave, provident fund etc. is not fixed properly. It seems that all the authority in respect of various aspects of nursing services should be given to Matrons instead of administrative officers in the government.

(19) Work-life cannot be separated from home-life. For an improvement in their performance at work, living conditions of the nurses need to be improved by taking immediate steps as suggested in Chapter 6.
(20) Importance of the nursing profession has increased more considerably than before for utilisation of new ideas and discoveries in the field of medical science. Nurses are no more mere assistants to doctors. They are the indispensable members of the medical team in the country. They have high potentials of functioning as social educators in respect of health care. Today, people do not give due status and recognition to the nursing profession. Active steps must be taken to strengthen the public image of the nursing profession as an important wing of medical science.

(21) Most of the problems of the government nurses will be solved if the Mohite Committee's recommendations are approved and implemented by the government. The Committee has made 42 recommendations in all, of which 28 were approved by the government, according to the declaration made by the State Minister a few months ago, but because of the financial and political difficulties in the State, implementation of the approved recommendations could not take place. The government should take immediate action in this respect.

(22) Today, working conditions of the government nurses are in a very bad shape. Their living conditions are not much better. Dissatisfaction prevails amongst the nurses as regards some of the aspects of their work-role such as hours of work, supervision, work-group, wages, promotional
opportunities, the only exception to some extent being the job content. The nurses have developed a negative attitude towards their job because of their dissatisfaction also in respect of job security, opportunity to make collective bargaining, guidance from the superiors, communication, delegation of authority, physical facilities at the work-place, occupational health protection, welfare facilities and the organisational set-up at the place of work. In the existing working conditions, the nurses' basic needs also remain partly unsatisfied, leave aside the case of higher order needs, like status, recognition and self-actualisation. The obvious result is total job dissatisfaction and a fall in the quality of services offered.

(23) There is, of course, a scope for improvement. These suggestions in this respect have been made by the nurses themselves which have certainly found to be justifiable and they have been recorded in the preceding chapters at proper places. One who wears the shoe knows where it pinches. The nurses themselves have been best judges of their working conditions. Admitting that individuals differ greatly in their motives, values and abilities and that these differences probably have an important bearing on the "optimal" characteristics of their work-role, a general picture of a
satisfying work-role of a nurse having excellent working conditions appears to be one which provides high pay, substantial promotional opportunities, considerate and participative supervision, an opportunity to interact with one's peers, varied duties and a high degree of control over work methods and work-pace. This work role provides adequate occupational health protection, job security, ample welfare facilities and timely guidance from the top people. This work-role is fitted in an organisation having balanced distribution of load of work, ideal delegation, free and uninterrupted communication which also looks after provision of excellent physical facilities at the hospital.

(24) It has to be admitted that the present work is a study undertaken by an individual with limited means. A deeper probe into the problems of nurses by some institution with ample facilities could certainly be more meaningful. It should be remembered that this is only a modest effort to emphasize the urgent need for improving the life and labour of nurses.

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