

Nursing Reforms in India

Highlights and Recommendations from the Roundtable

Overview

As an apex industry chamber in India, Federation of Indian Chambers of Commerce and Industry (FICCI) has been leading the way by recommending reforms and bringing together the policy makers and leaders from healthcare and allied industries.

On the sidelines of its annual healthcare conference, FICCI HEAL 2018, a roundtable on **‘Nursing Reforms: Critical for Achieving Universal Health Coverage’** was organized on August 29, 2018 by FICCI in collaboration with Elsevier. The roundtable was held on the backdrop of India heading towards universal healthcare with the Ayushman Bharat Mission which is likely to increase the demand of healthcare services in India. Nurses and nursing professionals constitute about 75% of the workforce in Indian healthcare, which makes nursing an important sector within the healthcare sector. Over the years, Government of India (GoI) has also enhanced its focus and investment in the nursing sector. The 12th five-year plan proposed an investment of INR 3,200 Crore in the nursing sector. According to NITI Aayog, India currently faces a shortage of 2 million nurses or nursing professionals. There is need for collective efforts by the government and private sector to address this massive gap and turn this into a huge opportunity.

Despite considerable improvement in health personnel in position (119% improvement in case of nurses), the gap between ‘staff in position’ and ‘staff required’ at the end of the 11th five-year plan was 52% for ANM and nurses. Indian nursing and healthcare sector continue to face multiple challenges such as decreasing uptake of nursing seats in nursing colleges, uneven distribution of nursing colleges in India, low employability of undergraduate (UG) nursing students, inadequate skills training, unattractive salaries, limited career opportunities, high rate of attrition and migration to global markets, and low social status for the profession in society. In view of these challenges, discussion during the roundtable was focused around the following three broad themes:

1. Quality of Nursing Education
2. School to Practice (Skills focus)
3. Career Progression

The roundtable brought together over 35 key stakeholders of nursing and healthcare sector encompassing representatives from key government and policy-making bodies like Ministry of Health and Family Welfare (MoHFW) and Indian Nursing Council (INC), nursing leaders and educators, international education groups, global information and analytics companies, industry experts, hospital and nursing administrators along with non-profit academic bodies. International perspective was shared by senior global executives of Elsevier and Ad Talem Global Education Inc (a United States corporation, that operates higher education institutions).

Key Highlights

The roundtable discussion provided a valuable platform for stakeholders' interaction, debate on policy direction as well as sharing of knowledge and best practices. The aim was to develop recommendations on forward-looking reforms to address on-ground challenges faced by nurses and nursing professionals and drive growth in the nursing sector as well as the healthcare sector, at large.

The Indian nursing sector faces challenges in terms of both- quantity and quality. Despite the ever-growing indigenous demand and India being a major exporter of nursing talent, the number of nursing colleges in India is declining. The industry-academia gap in nursing sector is huge and most of the under-graduate trained nurses joining the profession are not immediately employable. Hospitals conduct training courses of several months to enhance skills of the new nurse-hires before they are deemed to be adequately qualified to be deployed for patient care. As per industry experts, just 10% of B.Sc. Nursing (UG) graduates today are employable and possess the requisite skills. Private and corporate hospitals, which generally spend 3-6 months and incur high training costs (INR 60,000 - 87,000 per nurse) to make UG trained nurses job-ready, often suffer loss in terms of Return on Investment due to high attrition rate amongst nurses (approx. 40-70%) within the first few years of training.

Career progression of nurses remains a big challenge and there is need for:

- skill development and training of nurses to keep up with current and latest practices during their career
- making nursing an attracting profession– poor remunerations, growing workload, low social status and limited career opportunities often lead them to explore opportunities outside the country or outside the profession, thus creating a gap in availability of skilled nurses. Movement of nurses across the states for career opportunities is also impeded due to the time taken and cumbersome process for a nurse to register and migrate from one state to another within the country

Ms Rathi Ramachandran from Ministry of Health and Family Welfare (MoHFW), GoI cited that [common exit exams as per defined competencies for B.Sc. Nursing \(UG\)](#) graduates will be soon introduced. She also stated that MoHFW is planning to roll out a [separate cadre for nursing](#), under the Public Health Cadre for Ayushman Bharat, for which many states have started imparting training as well. National Health Policy 2017 has envisaged developing specialized nursing training courses and curriculum, establishing nursing school in every large district or cluster of districts of about 2 to 3 million population and establishing Centers of Excellence for Nursing and Allied Health Sciences in each State. MoHFW has committed to fund 138 nursing schools, strengthen the Nursing Councils and establish a Nursing Directorate which will be managed by nurses at the state level. There are also plans to introduce [Continuing Nursing Education \(CNE\) courses for each level](#) leveraging technology solutions. The government had also set up a committee that has submitted its recommendations on the minimum salaries for nurses in the country.

Mr Dileep Kumar, President, Indian Nursing Council (INC), shared some initiatives to address the current issues, including

- The [Nurse Registration Tracking System](#) developed by INC for Aadhar based mapping of nurses to provide reliable data on availability of nurses, help track them and tackle with the issue of duplication of registration
- INC plans to roll out a [single-entry course for Nursing- B.Sc. Nursing \(UG\)](#), by 2022, to ensure quality and parity of UG nurse graduates; other diploma courses will be phased out slowly
- A [two-year Nurse Practitioner Residency program](#) has been introduced by INC in 50 institutes approved by GoI; similarly, a [Nurse Practitioner Primary Healthcare program](#) has been introduced to cater to the

- 150,000 Health and Wellness centres under the Ayushman Bharat. INC has also submitted 48 algorithmic protocols for these nurses which are currently with National Health Mission (NHM) for approval
- To address the lack of research, INC has started the [National Consortium of PhD in nursing](#), where 300 scholars are already undertaking PhD
 - [A simulation center at SGT University](#), Uttar Pradesh, has been launched by INC in Public-Private-Partnership (PPP)
 - INC is about to launch a [Centre of Excellence \(CoE\) in collaboration with Jhpiego and Government of West Bengal](#). On the same lines, state-wise CoEs can be established with high end facilities (like teacher training hubs and simulation labs), which can serve as the think tank to GoI

Drawing from their international experiences, **Mr Hajo Olmanns, Mr William Franck and Mr Jan Herzhoff from Elsevier, RELX Group** cited how [global healthcare content and solution providers have designed solutions for different disciplines and for levels of users](#) (from education to professional clinical practice). These solutions have benefitted other global organizations and governments to solve unique challenges in healthcare and nursing sector. Taking a leaf therefrom, partnerships must be explored between government, private bodies and these solution providers on how to leverage available technologies to help address national priorities, skilling challenges and the need to implement inter and intra-discipline education and practice in nursing.

Case Study: CK Birla Women Hospital Group

The hospital introduced nurses at leadership level and involved them in design of hospital facilities and protocols to adopt tech tools like Hospital Information System (HIS). Nurses in the hospital also undergo training on customer experience, since they spend considerable amount of time with patients and contribute significantly to customer experience of the hospital. The hospital has witnessed considerable improvement in outcomes and key results for the group as a result of the above initiatives.

Recommendations

Skills-Focused Competency-Based Curricula, Assessment and Licensing

- To bridge the industry-academia gap and improve UG students' readiness for practice, there is a need to match Nurse competency framework for B.Sc. Nursing, to current hospital practices
- Nurse exit and licensure exams for B.Sc. Nursing graduates should be expedited and structured around the defined competencies and skills, like National Council Licensure Examination (NCLEX) exams, to improve overall quality of nursing students
- There is also a need for accreditation of nursing colleges to ensure quality nursing education and improve employability of students graduating from accredited institutions
- Mandate industry experience of working in a hospital for becoming a nursing teacher. Exposure and experience of working in hospitals, coupled with comprehensive teachers' training will better equip the faculty. For existing nursing teachers in academics without clinical exposure, certification programs should be introduced to get clinical exposure and teacher trainings

Under-Graduate Nursing Curricula Upgradation

Revise the current curricula to create a competency framework matched with current hospital practices with

- mandatory internship for B.Sc. Nursing students with assigned weightage in exams
- provision on simulation training for specified skills and topics which can be delivered and implemented through simulations at the UG level
- training on soft skills, 2-3 common languages to address language barriers and AETCOM (Attitude Ethics and Communication) modules

- introduction to patient-centered-care, evidence-based-practice, quality improvement, and use of Information Technology in clinical practice (e.g. basics of HIS, EHR and Robotics) to accustom students to systems early
- lessons on patient expectations and awareness programs on available career paths.

Use of Technology in Nursing Education and Practice

- Accreditation bodies for nursing colleges should mandate making college campuses and classrooms technology ready to enable use of digital tools for skill development like simulations, animations, e-learning and audio-visuals
- For enhanced adoption of technology in nursing education and practice, it is critical to train the faculty on how to leverage technology to teach and train, coach all stakeholders to harness the potential and minimize the fear and misconceptions around use of technology
- Nursing colleges must allocate some amount of training, development and resource budgets towards facilitating adoption of technology

Compulsory Internships during B.Sc. Nursing

- Private and corporate hospitals should open internship for UG nursing students to acquaint them with hospital set-up and standards to help bridge the industry-academia skills gap. This will also help address issues faced by nursing colleges like limited infrastructure and shortage of teachers
- In collaboration with public and private hospitals, the minimum standard skills (with level of competency) expected out of a nursing graduate must be defined and included in internship assessments
- Internship should be made mandatory and assigned weightage in exams and students who complete their internship successfully should get a preference for placement

Define Minimum Essential Skills for Nursing Graduates

- Identify the essential clinical skills along with desired competencies, for a nursing graduate to perform in a clinical set-up
- Introduce pre-clinical certification for these identified essential skills and mandate 1-2 weeks training on each essential nursing skill and competency for all nurses and UG students before they practice, for example, in AIIMS New Delhi, a one-week mandatory training on CPR (an essential skill) has been successfully executed for all UG courses as well as all the 4000 nurses, before they can practice
- Also introduce pre-clinical certification for nursing colleges without an attached hospital, where the college needs to take students to hospital in the first year for exposure to basic practices

Focus on Simulation Technologies in Nursing Teaching and Training

- B.Sc. Nursing competencies, skills and topics which can be delivered and implemented through simulation technologies must be mapped and indicated in the curricula
- Like the SGT University model (simulation center established using Public Private Partnership arrangement) at least 1-2 simulation centers must be established to train nurses on defined number of identified competences every week
- Integrate simulation training in basic teacher training course
- Nursing students (both UG and PG) must be encouraged to utilize the available simulation facilities in the region in collaboration with regional medical colleges, which in turn will help integrate inter-professional practice and cases in education
- Government should develop a viable model for investment or provide incentives for the industry to establish simulation centers in each state

Establishing State-wise Centers of Excellence (CoE) Through Public Private Partnership

- In line with the INC, Jhpiego and Government of West Bengal partnered Center of Excellence (CoE) in West Bengal, state-wise CoEs should be established to serve as the centers of education excellence as

well as think tanks to the government, with high-end facilities like teacher training hubs, simulation labs, and cutting-edge content and technology solutions for teaching, learning and clinical practice

- Government nursing colleges should also explore Public Private Partnerships (PPP) with global content and technology solution providers to learn how other countries have leveraged available technologies to help solve national priorities and challenges like skilling and inter-professional training

Nursing Research

- The government should develop at least one research institute in each state which can become a hub to support other institutes in the region under hub and spoke model
- With a dedicated budget for adoption of simulations, publications and e-resources in research, state CoEs, (recommended to be developed) can serve as research hubs in nursing for respective states as well

Incentivize Private Hospitals that provide On-the-job Skills Training to Nurses (Entry-Level and Specialists)

- Incentivize private hospitals and nursing homes with additional accreditation credits from NABH, which invest in training UG Nursing graduates to bridge the industry-academia skills gap or which sponsor nurses to take up INC specialty programs through paid leaves
- Provision under Section 135 of the Companies Act, 2013, should be made to allow hospitals to utilize CSR budget to run specialist courses or training programs for healthcare workforce
- Formally recognize the training of nurses in large hospitals to work in specialties like oncology, stroke, cardiac nursing, infection control, Operation Theatre, as INC/NABH recognized certificate courses which nurses can use for their career progression. Introduce micro certification courses, designed for practicing nurses to enable them to improve and specialize in specific skills
- Outline a standardized framework that the hospitals would need to adhere to run such certificate courses

Establish Minimum Salary and Fair Pay

- Develop a differential minimum salary for nurses, as per their performance in exit exams and completion of specialized courses
- Financial constraints often deter nurses to leave current jobs and take up specialized courses. After a defined number of years of practice, nurses must be given an option to take up specialized courses on paid study leave
- Accreditation bodies like NABH should ensure that nurses are not overloaded and underpaid with a check on adherence to nurse-patient ratio during hospital accreditation

Creating Standardized Job Levels and Career Paths for Nurses in Hospitals

- MoHFW should expedite the planned roll-out of new cadres for nurses
- Private hospitals need to create standardized job levels to rationalize salaries of experienced nurses vis-à-vis doctors for attracting talent and reducing attrition. Promotions and Appraisal of nurses in hospitals should be performance based and not just based on years of experience, recognizing small achievements and rewarding high performers
- Hospitals must also create career paths for specialized roles and showcase millennial nurses lateral career opportunities (like nursing specialties, nursing management or roles in accreditation bodies like NABH)
- Hospital administrators must include and empower nurses at leadership level in hospital board and all levels of management
- It is also imperative for the hospitals to involve nurses early on, in design of facilities and development of protocols
- The way hospitals plan to hire specialist doctors while a new specialty wing is planned in the hospital, specialty nurses hiring plan should be in place as well; which can be a part of the check list of hospital accreditation bodies like NABH

Continuing Nurse Education (CNE)

- CNEs (such as 6 months IGNOU course for mid-level nurses), planned by MoHFW, at all levels is a good initiative and will help nurses in skilling. Standardization of these CNEs will be important and use of online modules for delivering the CNEs will help expedite the implementation. The CNE facilities can further leverage on available simulation technologies, education technologies and clinical solutions
- Courses like Management for nurses, Trainer for nurses need to be introduced, wherefrom private hospitals can hire qualified trained nursing professionals with the desired competencies
- Taking a cue from the rising demand for home healthcare, nurses need to be given on-job training for home healthcare and specialized short-term courses should be developed to effectively cater to this demand

Inter-Professional Education and Training in Healthcare

- For early sensitization and familiarization of students from various healthcare professional courses like B.Sc. Nursing, MBBS and other allied healthcare courses in India, a module should be included in first year curriculum of all UG health professional courses to educate students on roles, responsibilities, sensitivities and boundaries of each healthcare professional
- Doctors and nurses should be sensitized to respect each other as partners to help remove the disparity and antipathy towards each healthcare profession
- Introduce inter-professional cases, in final year of all UG health professional courses, where students from various disciplines can come together and work hands-on in a clinical set-up. Health and Wellness Centers and recommended state simulation centers in each medical college can help conduct these inter-professional training for nursing colleges in the respective region

Strategic communication for promoting role of Nurses

- Case studies from hospitals and healthcare organizations highlighting their initiatives focused on nurses or involving nurses in leadership and decision making should be periodically published by bodies like FICCI and INC, explicitly outlining the impact on outcomes

Moderators

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Appendix

Other recommendations: # Get Case studies of trials of new methods. E.g. CK Birla Women's hospital trial can be published where nurses were a focus and how it has positively impacted outcomes

References: # <http://nursingandmidwifery.gov.in/12thFiveYearPlan.pdf>

Acronyms:

FICCI – Federation of Indian Chambers of Commerce and Industry

MoHFW – Ministry of Health and Family Welfare

INC – Indian Nursing Council

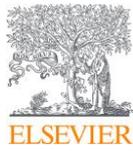
NABH - National Accreditation Board for Hospitals & Healthcare Providers

TNAI - The Trained Nurses Association of India

GoI – Government of India

UG – Undergraduate

PG – Postgraduate



About FICCI

Federation of Indian Chambers of Commerce and Industry

Established in 1927, FICCI is the largest and oldest apex business organization in India. Its history is closely interwoven with India's struggle for independence, its industrialization, and its emergence as one of the most rapidly growing global economies.

A non-government, not-for-profit organization, FICCI is the voice of India's business and industry. From influencing policy to encouraging debate, engaging with policy makers and civil society, FICCI articulates the views and concerns of industry. It serves its members from the Indian private and public corporate sectors and multinational companies, drawing its strength from diverse regional chambers of commerce and industry across states, reaching out to over 2,50,000 companies.

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