

MISSION, VISION AND FUNCTIONS OF THE NURSE IN PRIMARY MEDICAL CARE DURING THE PERIOD OF TRANSITION

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Abstract

The purpose of this article is to present the mission, vision and functions of the nurse today. Modern concepts examined the activities of the nurse as a specific profession, science and art directed towards actual and potential health problems in transition.

Key words: mission, vision, features, nurse

Modern views define nursing care as a specific professional activity, both science and art, focused on the actual and potential health problems in the period of transition.

The World Health Organization defines the place of the nursing profession as follows: “The main role of the nurse is to help human beings, sick or healthy, to preserve or recover their health by performing tasks which they would perform by themselves if they had the necessary strength and will, or had the necessary knowledge to faster restore their independence”.

The nurse is a needed and valuable partner to the doctor. His/her role and function (Henderson B., 1969) are defined as unique and characterized as supportive to the patient to regulate his own health.

The nursing function consists of 4 elements: patient, nursing work, environment and society. While performing her function, the nurse's work is independent, interdependent (in a team) and dependent on the doctor by performing his appointments.

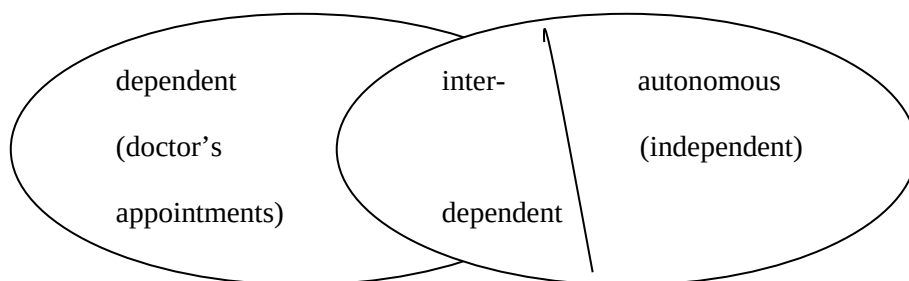


Fig. 1 Nursing care dimensions

The dimensions of these functions have different characteristics in the different European countries.

The study of the “nurse-patient” system allows us to formulate three major functions of the nurse in primary medical care: cognitive, applied and prognostic. They correspond to the major goals of the nursing profession. This outlines the space to define the mission and vision of nursing.

In this aspect, the mission of nursing can be defined as a process that guarantees a system of continuous high-quality health care that meets the health needs and focuses on the provision of health-driven lifestyle for the patients.

The realization of this mission needs a vision related to successful promotion activities of the nurses in successful general medical practices.

Undoubtedly, the vision is a good tool to establish a proper approach to the nursing job that guarantees the health safety of the patients.

The World Health Organization outlines the following main functions of the nurse:

- Promotion functions: they include work with healthy people and sick patients for the formation of health behavior, health education and healthy lifestyle.
- Preventive functions: the nurse must actively participate in the struggle against the socially significant diseases.
- Medico-educational functions: The nurse should train the patients and their families in self-help and active healthy behavior for the successful treatment and rehabilitation of the patients.
- Medico-social functions: they are family- and community-oriented and include consultations with various medical specialists and social assistance activities.
- Clinical functions: traditional nursing activities like diagnostics, treatment, rehabilitation, nursing care for patients with chronic diseases and terminally sick patients.
- Managerial functions: nursing care management like goal setting, planning of nursing interventions, organization, coordination and assessment of the results obtained for each patient, healthy or sick (Борисов В., 1993).

The nursing functions are regulated by the job description of the nursing specialization.

The complete and adequate performance of the nursing functions is possible when the nurse has the necessary professional competency which is a set of knowledge, skills and behavior required from the nurses to perform their functions and obligations (Table 1).

Contents	Types
Knowledge	• clinical • preventive • medico-social • medico-educational • medico-psychological • managerial
Skills	• communication • behavioral • skills of participation in physical and functional tests • healthcare problems solution skills • skills of monitoring and control on disease development • documentation skills • traditional nursing skills (manipulations included) • care skills for patients' hygiene and feeding • awareness of one's own role • cooperation skills with team partners.
Behavior	• holistic approach application • psycho-somatic approach application • patient-oriented approach application

Table 1 Contents of professional competency of the nurse (knowledge, skills and behavior)

It is important to note that the nurse's professional competency is not a "mechanical set" of knowledge and skills from different branches of medical science but a method of their use in primary health care.

Toncheva, Marinova and Stambolova work on the definition of new functions bearing in mind that the nurse is one of the basic figures needed for the success of the health reform.

The performance of all above mentioned functions demands from the nurse to have an adequate basic training. The specific features of primary medical care require additional training to guarantee a good adaptation to the performance of the tasks and meet the changing legislation requirements and health needs.

Tasks of the nurse in primary medical care

1. Health education of the population

- To study the level of health culture in the community: health knowledge, skills, habits, interests, etc.
- To consult people on the problems of healthy nutrition, physical activity, obesity, smoking, etc.
- To motivate the people to change their lifestyle with the aim to raise the level of their positive health.
- To improve one's own communication skills.
- To help people cope with stressful situations, protect themselves from trauma, etc.

2. Disease prevention

- Registration of the health status of the patients in the practice based on data received from the General Practitioner;
- Preventive activities to avoid or reduce behavior risk factors;
- Preparing plans of nursing interventions to avoid diseases;
- Assessment of nursing interventions;
- Immunoprophylaxis;
- Participation in preventive checkups of risk groups;
- Participation in screening programs;
- Work with specific and vulnerable groups of the population.

3. Health protection

- Organization of and participation in health programs designed to guarantee the patients' health status;
- Establishment of a strong and active attitude to health in society.
- Organization and participation in social and non-governmental organizations.

In this aspect, health education in the general medical practice is:

- help to individuals;
- training of patients in taking care of themselves and managing their own diseases;
- training in good lifestyle – physical activity, nutrition, smoking, etc.;
- training of patients in coping with their specific diseases – for instance, education of asthma, diabetes and hypertonic patients;
- creation of self-help groups of people of common diseases and health problems to share information and social support;
- work in the community

Health promotion is intended for both health and sick people but focuses mostly on the healthy ones. It is a kind of assistance to the people to manage their own health. From the point of view of the individual, health promotion encourages them to reach their best level of health possible.

The main goal of the nurse in primary medical care is to protect and improve people's health and the main tool to achieve that is the establishment of a healthy lifestyle both for the individual and the community. It is very important that the general practitioner and the nurse should motivate the patients to keep and improve their own health and apply in practice the acquired knowledge and skills. The main function of the nurse in primary medical care is to build in the individuals and the family strong beliefs in health –focused behavior and a new attitude to a new and healthy lifestyle. In this relation, the individual should not be a passive object of medical activities but an active performer in favor of his own health.

The nurse's primary task is to help in the health education and establishment of health-focused behavior and healthy lifestyle.

It is very important to use specific working tools like performance in multidisciplinary teams and work with risk groups of the population.

The nurse can also use various forms of training, individual training being most useful. Group training is also suitable because it utilizes the health potential of all participants.

The functions of the nurse are specific in their nature and must meet the health requirements, but they should also be evaluable, informative, effective, differentiated and available.

The nurse in primary health care plays a major part in the preventive activities as well.

Primary health care is the basic care and the role of the general practitioners and their teams is to meet the major health needs of the patients and transfer to the medical specialists only patients with specific health problems. (Иванов Г., 2010)

In many countries (UK, Sweden and others) the GP and the nurse in primary medical care meet 90% of the needs of the population and the rest of the cases need specialized care and hospitalization.

Primary medical care is crucial for the health reform because it is accessible, equally available to all, preventive, multidisciplinary, continuous and features high professionalism, ethics and autonomy in decision making (Иванов Г., 2010).

The latest years of transition in our country show that the mission of the nurse in primary medical care in an economic crisis is performed in conditions of growing social stratification, unemployment, increasing poverty and marginalization and the appearance of big groups of disadvantaged, poor, chronically ill people and invalids. The deterioration of the population's health status and the general public dissatisfaction make it necessary to analyze the unbalance of the health system and its potential capacity to meet the health needs of different groups of the population and implement a comprehensive approach based on a social liberal model of health care.

The need of an overall organization of general medical practice and application of a holistic and personally-oriented approach to the patient make it necessary for the GP to work in a team with a nurse .(Тончева С., 2000)

The key role of the nurse comes from her competences that meet the patient's need of outpatient care.

Primary medical care includes different nursing functions: promotive, preventive and others related to general medicine and corresponding to the health needs of the people and performed in their living conditions.

It is considered that the general medical practice is the most important for all promotion activities in society.

The nurses in primary medical care are major performers of promotion activities which have a big share in the contents of general medical care. These nurses perform a variety of functions and tasks

and have a lot of responsibilities that to a great extent distinguish them from the other medical nurses working in other sectors of the healthcare system.

Stambolova shows that, to be able to adequately comply with the growing requirements of professional competence, the nurse should have specific knowledge and skills for work in primary health care.

Nurses in primary medical care have a number of tasks that need the performance of their basic functions. These are related to the improvement of their competence by constant training, the improvement of the nursing care quality by respective means and tools for higher-quality performance active cooperation of the nurse with the patient, the family and the community by making them partners in the strife for health wellbeing, the responsibility for the protection, improvement and restoration of the population's health, the strict compliance with the professional and moral code, the application of the holistic approach to the care for the patient, the protection of the interests and image of the nursing profession by participation in unions, professional organizations and their forums (Стамболова С., 2006).

Performing these tasks, the nurses will be able to adequately meet the growing healthcare needs of the population in primary medical care and bring their activity in Bulgaria closer to the professional model of nursing practice in Europe.

Nowadays there is a heated discussion whether the nurses working with the families should specialize in family medical nursing and how they should function as such. Experts are working for the realization of this postgraduate specialization and trying to define it and clarify the necessity of it. An agreement has been reached that the purpose of the medical nurse is to improve the health of families and communities and the focus is on health promotion and disease prevention. There is no such agreement, however, how these activities are to be performed.

The nurse in primary medical care is expected to take part in the definition of the risk factors in the health-related risk factors in the family, in the planning and performance of the necessary nursing care. Taking these responsibilities, the nurse helps the family:

- to identify health-related risk factors;
- to identify and solve health problems;
- to identify health-related high-risk groups in the family;
- to establish priorities about the health need of the families;
- to mobilize health resources;
- to provide basic health care which should be available, acceptable, suitable and affordable for the people who need them.

* To identify health-related risk factors in the family: These factors include all aspects of family life like social, economic and educational factors, living conditions, environment, demographic factors, transport facilities and health care, with their impact on family health. We should identify the positive and negative factors that influence human health in each of these aspects.

* To identify and solve health problems: People know their own society best. They know their health needs and what is necessary to meet them. Family members are most affected by the problems and they should participate in their solution.

* To identify health-related high-risk groups in the family: In most families there are individuals of higher health risk than the others. These are single mothers, lonely parents, drug addicts, unemployed, mentally handicapped people, elderly people above 65, etc. People at risk must be identified and their health needs must be assessed and prioritized.

* To establish priorities about the health need of the families: In doing that, one should bear in mind the scope of the problem (the number of people affected), age groups, residence of the affected persons, impact of the problem on the family and how pressing it is.

* To mobilize health resources: Most often these resources are intended for specific age groups, disease categories or groups of people living in one community. There must be a correct connection between the available health resources and the identified health problems in the community.

* To provide basic health care which should be available, acceptable, suitable and affordable: Basic health care must be adequate to the needs. Availability means that medical services are of suitable type and quantity whenever needed and people can afford to use them.

All that conclusively proves that the main purpose of the nurse in primary medical care is to protect and improve family health.

During the transition period there is a growing demand for nurses who work close to the patients and offer health care oriented to the personalities, the social and cultural conditions in the family and the community where the medical problems arise.

Thus, in fact, is effected the holistic approach based on the idea that the change and restoration of the bio-psychological balance among the population is crucial for the high efficiency and effectiveness of health care.

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