

Changes in the profession of nursing



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Abstract

This paper sheds light on two important events that have occurred in the history of nursing and what they mean to the nursing profession today. One key event can be identified in the creation of the nurse registration act by North Carolina in 1903. This set a standard by showing nurses as professionals to the public. The same year three other states followed suit with all states having a form of registration in place for nurses by 1970. Another event is the recognition of Magnet status hospitals in 1982 by the American Academy of Nursing which set out to identify and create a work environment that was defined as exceptional and optimal for nurses. Two key organizations for nurses are the National Black Nurses Association and the American Association for Critical Care Nurses. These organizations reach to members with a specialty in mind- Black nurses and critical care nurses- each in their own way providing information, resources, and membership to unique nurses nationwide. *Keywords:* nursing, history, nursing organization, membership, resources

Events Shaping Nurses Today

Many events have dotted the history of nursing but the two that stuck out and will be included in this paper are the identification of forty-one hospitals in 1982 as “Magnet Hospitals” by the American Academy of Nursing and the passing of the first nurse registration act in North Carolina which licensed professional nurses in 1903.

Magnet status is awarded by the American Nurses Credentialing Center to hospitals that meet certain criteria that measure the quality and strength of their nurses. It effects patient care outcomes, nurse job satisfaction, staff turnover rates, evidence based practice, and an open communication model between levels of health care staff.

When nurses have higher job satisfaction rates it reduces turnover, encourages higher education for nurses or a drive to continue furthering education, better nurse to patient staffing ratios and better working conditions. It creates an atmosphere of teamwork which in turn leads to higher rates of participation in patient care. When there is more “ skin in the game” or accountability then patient outcomes increase. Better patient outcomes result in lower mortality rates, better infection control, and higher patient satisfaction rates.

Magnet status changes a hospital by setting five components in place. These components include leadership, empowerment, professional practice, knowledge, improvement, innovation, and results. These standards allow for better patient safety and outcomes.

Magnet status effects patients, nurses, staff, and the community. It empowers nurses and helps encourage stronger goals over all. It creates better and stronger credentialing processes, increases the hospital policies to protect and support nurses, allows for more teamwork between levels of health care professional staff and provides safer facilities.

Magnet status was created to set a work environment standard for nurses that was excellent and “ allows them to practice under optimum conditions”.

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The registration act ensures that states are protecting their citizens from harm by regulating the basis in which a person can act under the title of nurse. It ensures that students or persons are eligible to work under a scope of practice and regulates the laws of nursing.

The nurse registration act is important because it “ protects the title of nurse and improves the practice of nursing” (Russell, 2012). along with the nurse practice act each state sets a clear expectation of rules and regulations for nurses to abide by. This ensures that the quality of nursing performed is standard at a minimum for each state and each nurse with regards to the patient and their safety. Though each state must set their own limits and terms of what defines a minimal practice nurse, it also defines what educational programs are acceptable, reputable, and maintain a standard of education for these professions to be obtained. Without that regulation any program could produce nurses that may not meet a minimum standard of care to practice.

Who does the registration act effect? The registration act effects patients and nurses by setting a standard via each state that regulates the practice of nursing. Nursing requires special skills, training, decision making, attitudes, behaviors and is widely varied based on the path of nursing one takes.

North Carolina was the first state to set a precedent in 1903 by creating a nursing registration to license professional nurses in order to legitimize the profession to the public (1960). By 1970 all states would have a registration in place that limited the people who were hired and worked as nurses, increased the quality of nurses, and improved nursing education. A set of

standards for education programs and for nursing regulations to be met ensures that in the future tighter rules can be put in place to continue to protect the nursing profession and its future patients.

Nursing Organizations of Importance

The American Association of Critical Care Nurses (AACN) is a unique organization founded in 1969 (under the name American Association of Cardiovascular Nurses and later changed in 1971 to its current namesake) for nurses specializing or interested in critical care or intensive care nursing. According to their website the mission statement of the AACN is as follows: “Patients and their families rely on nurses at the most vulnerable times of their lives. Acute and critical care nurses rely on AACN for expert knowledge and the influence to fulfill their promise to patients and their families. AACN drives excellence because nothing less is acceptable.” The vision of the AACN is “dedicated to creating a health care system by the needs of the patients and families where acute and critical care nurses make their optimal contribution” (AACN). This mission and vision align with the goals that critical care and other nurses caring for critical patients take to heart. The values held by the organization- accountability, leadership, innovation, and collaboration- are shown in the resources and benefits provided for the members along with the reputation held by the certifications earned nationwide by members nationwide.

The AACN takes membership to another level by providing an one week annual conference that brings in the newest technology and best evidence based practices for nurses to take back to their work. Online education in the

form of the Essentials of Critical Care Orientation (ECCO) modules are available for new nurses and seasoned nurses with continuing education credits awarded upon completion. Certifications for progressive care nurses, critical care nurses, and clinical nurse specialists are provided upon examination. These certifications are considered to be a gold standard of knowledge in the field awarded and are only completed after a required number of hours and years worked in the specialty. The organization provides journals, clinical tool kits, evidence based resources, and other online programs to the nurses that are members.

Membership varies in cost and is charged according to the level of membership a nurse subscribes to. A student can obtain a membership for an annual fee of \$52. A retired nurse membership is \$52 annually, international digital only is \$78 annually, Emeritus status membership is \$59 per year, and active or affiliate members are charged \$78 a year. These memberships include access to over 225 local chapters, scholarships, grants and volunteering opportunities alongside over 100, 000 other AACN members (Membership). After obtaining credentials for PCCN, CCRN, or another specialty offered by AACN many nurses receive plaques with their names and credentials displayed.

In a recently released publication the AACN aims to “standardize how nurses evaluate patients for pain” (Practice, 2018). Current practice is patient description of pain to a nurse. In critical care many patients are unable to perform this task due to level of illness, intubation, and/or sedation. Pain has been named the fifth vital sign and the level of importance is prominent in JCAHO evaluations of facilities. This AACN Practice Alert aides in defining a <https://assignbuster.com/changes-in-the-profession-of-nursing/>

problem, the expected nursing practice and aides in supporting evidence and research for practice.

Another specialized nursing organization is National Black Nurses Association, Inc. (NBNA). This organization was founded in 1971 upon the goals of two other associations that had joined together- the Los Angeles and San Francisco Bay Area black Nurses Associations. The primary goals were to “unite black nurses to influence health care services for black people and promote the inclusion of blacks in nursing education and nursing leadership positions” (History). The end of the National Association of Colored Graduate Nurses (NACGH) was a significant milestone for black nurses fighting for equality and access to membership in the American Nurses Association. The mission of the NBNA is to “represent and provide a forum for Black Nurses to advocate and implement strategies to ensure access to the highest quality of health care for persons of color” (NBNA).

The organization supports over 150, 000 African American nurses with 92 chapters in 35 states, Eastern Caribbean and Africa. Resources for these members include access to online job career centers, a bi-annual published professional refereed journal and quarterly newsletter, continuing education contact hours, a premium four day conference that includes exhibitors and speakers, scholarships and a voice in the National Black Nurses Day on Capitol Hill (Membership).

The organization is currently working in conjunction with Pfizer and the National Medical Association to develop a plan of action that impacts “critical disparities that affect the health of our community” (New). Through

the African American Health Engagement Study (AAHES) research looks at gaining details that can increase health equity in African American communities. The NBNA and Pfizer how to gain better trust and communication to better suit the health care needs of African American communities. The study ended in 2017 with 5% of the 12% total of African Americans in the United States having participated. There were eighteen focus groups from African American communities in Chicago, Houston and Philadelphia. The AAHES also looks to see where organizations can also increase African American health are provider organizations, define and initiate targeted initiatives to respond to health care needs specific to African Americans, and facilitate effective health seeking behaviors via education and community awareness(“ NEW STUDY PROVIDES CRITICAL INSIGHTS ON UNIQUE HEALTH NEEDS OF AFRICAN AMERICANS”, 2018).

Professional organizations are important to the nursing world because they provide a resource for nurses based on their specialty that aids in keeping up with information that is new in the field. It gives nurses a form of support for evidence based research and provides for better patient outcomes.

Professional organizations help connect nurses to others, forming another community of support they can go to in times of need. Without professional organizations there would not be a standard to which nursing would need to adhere to. There would be too many variations in care, patient outcomes, nursing education, and evidence based research would have the potential to not exist.

Nurses have been labeled the most trusted profession for seventeen years in a row and does not show any signs of changing that in the future. Held to a

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higher level of standards each year via public perception and state regulations, nurses continue to push through hurdles to set a standard of excellence. Each mark in nursing history promotes change just like the nurse regulation act and the drive for Magnet status in a hospital. Nursing organizations like NBNA and AACN continue to push through outdated practices to find unique ways of promoting their nurses, engaging their community, setting the bar higher for patient care outcomes. The future looks bright for new ideas to be put into action and for nurses to grow with support, evidence and resources at their fingertips.

References

- 1960 – 1989. (n. d.). Retrieved January 13, 2019, from <https://www.nursing.upenn.edu/nhhc/nursing-through-time/1960-1989/>
- History. (n. d.). Retrieved January 13, 2019, from <https://www.nbna.org/history>
- <https://www.aacn.org/newsroom/practice-alert-aims-to-standardize-pain-assessment>. (2018, December 11). Retrieved January 13, 2019, from <https://www.aacn.org/newsroom/practice-alert-aims-to-standardize-pain-assessment>
- Magnet status: What it is, what it is not, and what it could be. (n. d.). Retrieved January 13, 2019, from <https://www.truthaboutnursing.org/faq/magnet.html>
- Membership. (n. d.). Retrieved January 13, 2019, from <https://www.aacn.org/membership>
- Membership Benefits. (n. d.). Retrieved January 13, 2019, from <https://www.nbna.org/member-benefits>

- NEW STUDY PROVIDES CRITICAL INSIGHTS ON UNIQUE HEALTH NEEDS OF AFRICAN AMERICANS. (2018, August 14). Retrieved January 13, 2019, from <https://www.nbna.org/content.asp?contentid=51>
- Russell, K. A. (2012). Nurse Practice Acts Guide and Govern Nursing Practice. *Journal of Nursing Regulation*, 3 (3), 36-42. doi: 10.1016/s2155-8256(15)30197-6