

# Nursing Profession in India

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# Section 1

## Nursing in India

# Types of Nurses in India

Schedule I, Indian Nursing Council Act, types of nurses:

- General Nursing
- Midwifery
- Auxiliary Nursing-Midwifery
- Health Visitors

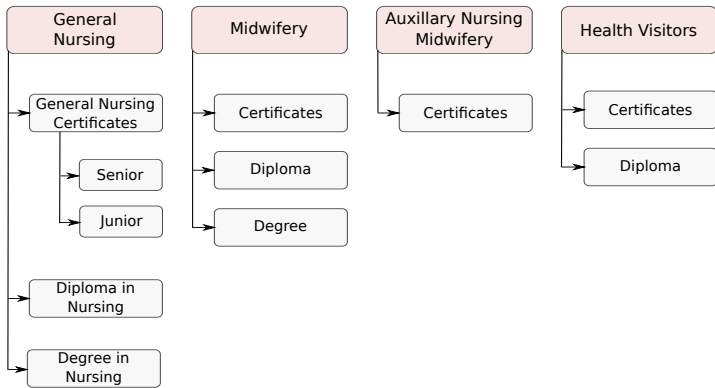


Figure 1: Qualifications for nurses in India

## Number of nurses

- OECD (2014): 1.8 million nurses (1.4 per 1000 persons)
- KPMG (2013): 1.71 nurses and midwives per 1000 persons
- State Nursing Council Nursing Register, not Available at national level
- Indian Nursing Council (INC) introduced Nurses Registration and Tracking system: 3 Identity Cards till 13 May 2017

## Minimum requirements for admission to nursing courses for students

Factors	Auxillary Nursing and Midwifery (ANM)	General Nursing and Midwifery (GNM)	B.Sc.(Nursing)
<b>Age</b>	17-35 years	17-35 years	17 years minimum
<b>Education</b>	10+2 (Science/Arts)	10+2 (Science/Arts)	10+2 (Science and English) aggregate of 45% marks
<b>Duration</b>	2 years	3.5 years	4 years
<b>Type of Course</b>	Diploma	Diploma	Degree

**Table 1:** Minimum requirements for admission in nursing courses

## Section 2

# Nursing Institutes

Type of Nursing Program	Number of institutes	Intake capacity (Students per year)
ANM	1986	57019
GNM	3123	125762
B.Sc.(N)	1831	91806
Total	6940	274587

Table 2: Nursing Institutes in India as of October 2016



## Section 3

### Requirements for nursing Institutes

<b>Factors</b>	<b>ANM</b>	<b>GNM</b>	<b>B.Sc.(Nursing)</b>
<b>Parent Organisation</b>	Govt. body/Trust /Society /Charitable company	Govt. body/Trust /Society/ Charitable company	Govt. body/Trust /Society/ Charitable company
<b>Total Area<sup>1</sup></b>	25685 Sq.Ft.	37500 Sq.Ft.	54470 Sq.Ft.
<b>Location</b>	Non-residential, institutional area	Non-residential, institutional area	Non-residential, institutional area
<b>Teacher student ratio</b>	1:10	1:10	1:10

**Table 3:** Minimum requirements for nursing courses

<sup>1</sup>Includes teaching and hostel

<b>Factors</b>	<b>ANM</b>	<b>GNM</b>	<b>B.Sc.(Nursing)</b>
<b>Hospital Type</b>	Rural/Affiliated/ Parent hospital	Parent hospital	Parent hospital
<b>Number of beds</b>	30-50/150/150 beds respectively	100 bedded, with 75% bed occu- pancy	100 bedded, with 75% bed occu- pancy
<b>Affiliation</b>	District or Sec- ondary care hospital	Prescribed criteria	Prescribed criteria
<b>Student pa- tient ratio</b>	–	1:3	1:3

**Table 4:** Minimum requirements for hospitals attached with nursing courses

## Minimum Requirements for nursing courses

ANM, GNM and B.Sc. Nursing course guidelines also have following requirements:

- *'If the institute has non-nursing programme in the same building, Nursing programme should have separate teaching block'*
- *'Shift-wise management with other educational institutions will not be accepted'*
- *'Separate teaching block shall be available if it is in hospital premises '*
- *'No part time nursing faculty will be counted for calculating total no. of faculty required for a college'*
- *'An organisation with a hospital with 150 beds with minimum 30-50 obstetrics and gynaecology beds, and 100 delivery cases monthly can also open Auxiliary Nurse and Midwives school'*

## Minimum Requirements for nursing courses

Both GNM and B.Sc. require 100 bedded parent hospital. Option of affiliate hospitals if 'the required learning experience is not available in parent hospital'.

Criteria for affiliated hospitals:

- Types are limited and specified: community health, mental health, specialities like cardiology etc
- Minimum 100 beds
- Maximum distance: 30 km, 50 km for hilly and tribal areas

## Section 4

### Issues in profession

## Issues in nursing profession

- Absence of data
- Strict requirement for educational institutes - has to be in industrial area, must have parent hospital
- High attrition rate of 40% as compared to 25% for other health care professionals <sup>2</sup>
- Lack of multi-disciplinary syllabus
- Need of bridging courses: ANM to GNM and B.Sc.

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<sup>2</sup>See KPMG, 2013

## Issues in educational institutes

The INC is the regulator. 6940 institutes for basic nursing courses, 1728 recognised institutions for post bachelor courses( M.Sc., Post Basic B.Sc., Post Basic Diplomas):

- Inadequate number of teachers
- Non-uniform distribution of nursing institutions across states
- Lesser institutes offering post graduate program - One National Consortium for PhD students in the whole country



## Section 5

### Steps taken

## Steps taken by the government

- Data collection and maintenance started since 2016. s
- Post Basic Diploma guidelines in five fields were introduced in 2007.
  - Critical Care Nursing
  - Emergency Nursing
  - Neonatal Nursing
  - Nurse Practitioners Midwifery
  - Oncology

Institutes offering these diplomas is low - 311 as of 2016<sup>3</sup>

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<sup>3</sup>Indian Nursing Council, 2016.

## Section 6

### New approach to skills

## New approach to skills

- Government is moving towards *voucherisation*
- National skill development programme can work for healthcare worker
- Moving to a more nuanced regulatory structure

## Section 7

### Suggestions

## Our View

- Various committee report have recommended increase in nursing output. However, No clear mechanism
- Change required at regulatory level

## Live Register of Data

Maintaining a live register of data regarding number, distribution and migration of nurses <sup>4</sup>

- Registration can be at the state or college level
- Electronic application for change in status of employment by registered nurses

Advantages:

- This will help in easy verification of the nurses by employers
- This data can also help study the trends in nursing employment

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<sup>4</sup>See: FICCI, 2016

## Minimum requirements for setting up nursing institute

### **Adopt output-based requirements for setting up a nursing institute:**

- Remove minimum criteria of hospital for ANM course at 100 deliveries/month
- Allow students to assist/intern in minimum number of cases at any nearby hospital
- Allow nursing institutes to be attached to an existing government/private hospital or MBBS/BDS college instead of parent hospital
- Allow biannual admissions at existing nursing colleges <sup>5</sup>

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<sup>5</sup>See: *High Level Expert Group Report on Universal Health Coverage for India 2011*



## Developing vocational skills

- **More guidelines on specialised training:** INC recognises five specialities in nursing(Diploma) as compared to 132(MD,MS,DM,Mch,Diploma) for a doctor in India.
- **Guidelines on independent practice:** INC has draft guidelines on 'Nurse Practitioner in Primary Health Care'which should be implemented
- **Use of technology in training and practice:** For example in US, the National Council of State Boards of Nursing introduced 'Telehealth and the Nurse Licensure Compact'in 2000, which allows nurses to have one multi-state license and practice in more than one states both physically and electronically

## Increase the availability of teachers

- Allow institutes to hire and work with part time teachers
- Allow shift-wise management of nursing colleges with other education institutes

## Refined intervention

- Current system of low level checks: No institution will have more than 75% as average score
- Need for more granular intervention
- We can track individual performance now

## Section 8

### Summary

## Summary of suggestions

- Voucherisation can direct subsidies and free up setting up institutes
- We need regulation which operate on output and outcome based rules
- Registering nationally provides better credential validity

Thank You