

The value of nursing

For referencing Chabal LO and Hibbert D. The value of nursing. WCET® Journal 2023;43(3):8-9.

Never doubt that a small group of thoughtful, committed people can change the world; indeed it is the only thing that ever has – Margaret Mead¹.

Florence Nightingale's work in the 1850s demonstrated how important nurses are within the healthcare system – not only dealing with the prevention, control and management of conditions for patients, but also in terms of anticipating, planning and leading initiatives, and in advocacy and empowering others. She implemented actions that are still relevant today and planted the seeds of evidence-based nursing care, advanced practice, and the science of nursing.

Today, more than 170 years later, nurses' working conditions are still challenging across the world. More than ever before, nurses and nursing are facing common challenges that affect the ethos of nursing, particularly the ability to attract and retain nurses as a lifelong career option. Nursing shortages, a high staff turnover within healthcare organisations, challenging workload and conditions, job-related stress, as well as mental health and sleep disorders, have a huge impact on the quality and continuity of care; this in turn has economic implications for organisations and impacts the sustainability of the nursing profession.

Not only do we need to have more trained nurses, but we need to retain them in clinical practice, and that comes with better recognition. As essential workers, nurses were applauded at the beginning of the COVID-19 pandemic for the sacrifices and the crucial work that was undertaken – these were the faces of *Time's* 'Person of the Year' front page. We are still those essential workers, and nurses should be key partners in decision making within all levels of the healthcare system.

Recent changes include the introduction of specialised fields of nursing and nurse specialists or nurse practitioners; however, there is limited global consistency. Through legislative or regulatory processes, many countries have enabled specialist nurses to be able to assess and prescribe diagnostic or clinical care under their respective countries' guiding protocols; some countries even allow privileges to provide first line medical

management. In many countries, nurses perform clinical care under the direction of the treating doctor or physician.

It is therefore puzzling that after all these years, we do not have agreement on an international standardised nursing degree, and in some countries not even at a national level. This would seem important when around the world we are seeing increased instances of chronic multifactorial diseases, poly medication, ageing populations, and complex patients requiring an advanced structure of care inclusive of interprofessional practice.

It is even more puzzling to see how the ability to select or prescribe wound dressings, ostomy appliances and associated products is so limited in many countries, especially when specialist nurses are more likely to have the knowledge and expertise to understand indications, contraindications and application of these various products, particularly when to (re)assess, to discontinue, or to refer to another specialised healthcare professional for advice.

As specialist enterostomal therapists (ET), wound ostomy continence (WOC) nurses, we are more costly and, on the surface, do not appear to bring enough financial benefit to health services. However, the reality is that there are hidden savings that need to be taken into consideration, such as patient benefits and improved health outcomes. Almost all studies looking at the benefits of ET, WOC and stoma nursing demonstrate enhancements in care and/or health outcomes in one way or another.

It is beneficial to make specialised nurses such as wound ostomy continence nurses more visible by promoting their roles, functions, skills and resultant clinical outcomes, thereby increasing awareness worldwide of the value of these roles. This is especially so when healthcare organisations suffer increasing economic and budgetary constraints, and when better care should come before profit. We know that successful interprofessional coordination, collaboration and communication are rewards for our abilities. Further, valuing the patient as an expert of their condition and experience are also crucial factors for successful outcomes.

The International Council of Nurses (ICN) Congress, held in Montreal in July 2023, was an opportunity to meet nurses from all over the world and to share and feel the real diversity of our nursing profession. There is still work to be done in gaining recognition for the nursing profession overall and

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within our respective specialty fields. Such recognition would enable us to claim the value of our care, including the cost benefits we generate by screening, initiating preventative actions, managing complications and minimising recurrent presentations. To gain our rightful place in the interprofessional team with our own skills and knowledge, not as a threat but as a capital gain for better patient outcomes, is a common goal and key component to more efficient healthcare organisations and health systems globally.

Being a part of this congress has also been an opportunity to let the worldwide community of nurses learn about us, not only as ET/ WOC/ stoma nurses / clinicians but also as an organisation (the WCET®). This was achieved in different ways – through ePoster presentations, our presence at the WCET®/ Nurses Specialised in Wound Ostomy and Continence Canada (NSWOCC) booth, and with discussions with participants.

The WCET® also supports the Wound Ostomy Continence Nurses (WOCN®) Society's initiative of endeavouring to quantify the impact of WOC nursing and provide valuable justification for WOC nursing positions via their *Value of a WOC nurse quality improvement project*². We look forward learning more about the outcomes and benefits of this study and hope our own WCET® initiatives on this topic come to fruition.

The last WCET® Norma N. Gill webinar was also really inspiring regarding valuable leadership skills and lessons learnt from our founder (Norma N Gill), our pioneers and mentors – many thanks to Dr Kathleen Leask Capitulo for her inspiring talk. We hope you had a chance to connect, learn and be inspired for your own daily practice.

When speaking of the value of nursing, we must mention the outstanding work of Dr Barbara J Braden and her team on pressure injury screening and prevention that is acclaimed worldwide. We are still mourning her recent passing and will keep her in our thoughts and hearts. All our prayers go to her family, relatives, friends and colleagues. She will be much missed by us all; may she rest in peace. Dr Braden was exemplary proof on how nurses can make a positive difference internationally in every healthcare setting. The Braden Scale for Preventing Pressure Sore Risk had a significant and positive impact on the necessity for early screening, as well as the identification and mitigation of risk factors for pressure injuries, through a coordinated evidence-based plan of care. Please refer to our WCET® *Bulletin* 2021;18(3) and 2023;20(2) for tributes to Barbara and her outstanding legacy.

As we prepare for an update of the *WCET® International Ostomy Guideline 2020*, we thank Hollister® for their ongoing support on this important project. Also many thanks to Dr Emily Haesler for agreeing to join the group as methodologist; we are sure her contribution will be an asset to bring this new edition to another level. As with previous editions, you might be invited to contribute your expertise as a stakeholder or reviewer. Your support will be greatly appreciated.

We also take this opportunity to warmly thank Prilli Stevens, WCET® President 1980–1984, the first WCET® President to also be a professional nurse and a WCET® life member, for allowing us to republish the posters she developed and published in 2012 as historical documents. WCET® members will be able to download these posters for free as memorabilia from our online store. The WCET® Education Committee will work on reviewing and updating some of them as needed and/or create new ones based on recent evidence, so stay tuned.

When looking back on our achievements in relation to our last biennial and annual reports, and knowing that the Executive Board (EB) have not had a chance to meet all together in person since 2019 with differing time zones spanning 12 hours across the world, we could not be prouder of the team and its supporters. As a dynamic ever-changing organisation, a new phase of transition for the EB has now started, allowing the incoming new EB members to be mentored by the sitting EB members. When the time comes, the new EB will be ready and empowered to continue the good work and help move us forward.

The low results of the membership survey have been analysed and compared to previous surveys for relevance. As previously mentioned, they will be used to assess the success of the 2019–2023 Strategic Plan, and to discuss and agree on the 2023–2027 Plan. Once again, many thanks for all of you who replied; your comments are valued. An article about the highlights of the survey will be published in the *WCET® Journal* and, for the first time ever, before our next biennial congress, so stay tuned to read more about this.

Thanks again for all you do daily for your patients, your community and beyond. To quote Donna Wilk Cardillo, “Nurses are the heart of healthcare”³. So be proud, be fierce, be yourself. You are heroes.

Sincerely

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REFERENCES

1. <https://www.managementisajourney.com/>
2. WOCN®. The value of a WOC nurse; 2023. Available from: <https://www.wocn.org/the-value-of-a-woc-nurse/>
3. <https://www.qcs.co.uk/nurses-heart-healthcare>