Review Article

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Outsourcing & Emerging Issues in Healthcare

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ABSTRACT

Nursing has come long ways since then and the changing circumstances have brought lots of changes in the profession. India has 1,597 Diploma Nursing Colleges, 833 Degree Nursing Colleges and 97 Colleges providing Post Graduation, which has the capacity to train 79,850 diploma nurses, 41,650 graduate nurses and 1,940 post-graduate nurses every year. A 2015 report on the nursing brain drain in India reveals that up to one-fifth of the nursing labour force may be lost to wealthier states due to migration. India is faced with the double challenge of producing more nurses for emigration and at the same time filling vacancies within India.

Key words: Outsourcing, Emerging trends, Healthcare, Health.

INTRODUCTION

Nursing as a profession is dedicated and devoted to the service of mankind and is rightly regarded as the noblest of all the professions. Florence Nightingale immortalized the profession by her sense of duty and devotion during difficult times. Nursing has come long ways since then and the changing circumstances have brought lots of changes in the profession. India has 3,123 Diploma Nursing Colleges, 2611 Degree Nursing Colleges and 637 Colleges providing Post Graduation, which has the capacity to train 1,12,722 diploma nurses, 1,16,671 graduate nurses and 12,390 postgraduate nurses every year according to Indian Nursing Council present statistics.

BACKGROUND

India has 18,62,570 nurses, 8,15,515 ANMs and 56,219 Health Visitors have been registered with various state nursing

councils upto 31st Dec 2015. [6] According to Health Ministry estimates, by the end of the 11th Plan (2007-2012), India will require 10.43 lakh nurses. But with the existing infrastructure, the number would stand at just 6.84 lakh, short by 3.59 lakh. [1] "Nurses are the backbone of the Indian healthcare system and their shortage in the long term will have hazardous impact on the overall functioning of the sector. It will lead to shutdown of hospitals, unavailability of quality medical care and increased clinical complications," said Dr K K Aggarwal, Secretary General of IMA. "A uniform pay scale needs to be implemented and a more robust educational and training program implemented. At present nursing colleges are scattered and concentrated in the South. There is also a need to implement a common examination for nurses like the NEET for doctors. "The working conditions of nurses also need to be improved," he added. [5]

- In the 1990s, India's ranking in terms of the number of registered nurse applicants aspiring for the U.S. licensure was sixth after the Philippines, Canada, South Africa, Nigeria, and Korea.
- o By 2004, however, it had jumped to second position, next only to the Philippines, in large part due to the expansion of CGFNS (Commission on Graduates of Foreign Nursing on School) examination centers in India.
- New Delhi in north India, and Bangalore and Kochi in the south have emerged as the three main recruiting hubs.
- O According to the CGFNS Report of 2004 the Credential Verification Service carried out for New York alone was 7,761 and out of that 7,396 were for

registered nurses and remaining 365 were other health professional. [2]

Reasons for Outsourcing

- An acute shortage of nurses in the US has translated into whopping pay packet of \$45,000-\$65,000, eligibility for a Green Card and perks for Indian nurses, at par with their US counterparts.
- ♣ Stephen S. Nuell, President of Nurses for International Exchange says the demand for nurses has escalated so much that the US Congress is set to bring in a legislation to make visas to nurses easily available. [3]
- ♣ Indian Nurses possess the qualities like—
 - Good communication skills
 - Well trained and skillful
 - Motivated to work (for long hours)
 - Sincere, dedicated & hardworking
 - Adaptable

And because of this they are in great demand worldwide. [4]

Impact of outsourcing nurses on quality of local health care services

o Educational dimension-

- Increase in number of Nursing colleges in the private sector in India.
- Increased competitions, improving quality of education.
- Increase in number of qualified nurses every year.
- People from middle & high socioeconomic group are joining the profession.

o Social dimension -

- Nurses are being recognized
- Improving opportunities in service and teaching
- Increase demand in marriage market

o Economic Dimension –

- High salary
- Improving socio-economic status
- Job security

Negative Impact of outsourcing

India's Nursing Advisor Dr. T Dileep Kumar says: "States like UP, Bihar, Orissa, MP and Rajasthan are the worst affected by shortage of nurses. Also, for every doctor, there should be three nurses. But at present, the doctor nurse ratio in India is 1:1.5." [1] "There is a 40-50 percent shortage of nursing personnel due to increasing demand for nurses, nursing and allied services in the healthcare sector across the country and globally," said V. Ravi, registrar of the state-run National Institute of Mental Health and Neurosciences (NIMHANS) at an international conference here on `Nursing education & training in a global context`. [7]

Some of the other factors includes-

- Outsourcing the teaching faculty by other countries results in lack of trained, qualified and experienced nursing teachers in the country.
- o Immense work pressure on the remaining nurses in India, where the nurses per thousand populations is 0.9 against a world average of 3.3.
- The growth of life expectancy in India from 54yrs in 1981 to 65yrs in 2001 has put pressure on healthcare sector, for strengthening the nursing profession here.
- The nurse: patient ratio ideally should be 1:3 -1: 5 in the general wards whereas actually it goes up to 1: 30, 40 and so on.
- In ICUs (Intensive Care Units) the recommended nurse patient ratio should be 1:1 whereas it is usually seen to be 1:5- 1:6 in some of the hospitals and even worse in most of the healthcare settings.
- Poor nursing standards in the country is seen due to lack of availability of trained nurses in country, Nursing Homes and local Hospitals employ untrained people and label them as nurses, lack of quality service in the health care delivery system, lack of required recognition to qualified nurses and factors such as

demotivation & low status image in workplace and in the community.

CONCLUSION

India has faced with the double challenge of producing more nurses for emigration and at the same time filling vacancies within India.

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