

Healthier Life with Nursing Leadership in Health Care System

Hwa Joong Kim

Former Minister, Ministry of Health and Welfare, Korea

Introduction

I am honored and privileged to speak in the international nursing conference. I also feel a profound sense of responsibility, since the topic of this conference is of great significance in the future of nursing care. Actually, the issues we are going to cover in this conference today are closely related to what I have considered important challenges to the nursing community for the last four decades in my career. So I would like to share with you for the next forty minutes my thought on the desirable path our nursing community should take in the 21st century, which is establishing nursing leadership in the healthcare system.

1. Healthier Life

Although good health is what everybody wants, it can only be attained through healthier life. The status of health, by a condition of health-illness continuum, is largely affected by two major factors.

“Health crisis” people may confront at each stage of their lives is the first important factor. Throughout their whole lives, people continue their physical, mental and social development, while facing a crisis during a transition period when they move to the next phase. If the common health issues for each stage of life—when you are infants, young children, students, adults, and senior citizens—are properly dealt with, you can enjoy good health. Otherwise, you will become sick.

Another key factor is called a “health risk”. Today, people are exposed to various health risks such as biological infections, chemical substances, mechanical accidents and mental stress to a different extent depending on their social status, occupations, residential areas and other socioeconomic conditions.

If one desires to lead a healthier life, therefore, the person should overcome the health crisis at each stage of life for successful development and at the same time should be involved in health promotion efforts by eliminating health risks or seeking proper treatment for diseases. But it is often not easy for an individual to make specific and timely efforts for health promotion. That is why professional health care is needed.

2. Health Care

There are three essential approaches to healthier life:

(1) Self-health care: This refers to the people’s efforts to take care of their own health. But in reality, most are not living healthy lives due to the lack of skills, knowledge or determination.

(2) Professional health care service: Health care professionals need to develop the related skills and knowledge for those who need them.

(3) National health care system: This is a government-led initiative to help its people live healthier lives.

In other words, good health requires approaches at three levels—“individuals” who want to live healthier lives, “health care professionals” who provide health care services to improve health of other people, and “government” which develops a national health care system for the healthier life of its people. Among these, it is health care professionals who play the most important role. They are the ones who are best aware of the specific requirements for healthier life at these three levels.

3. Professional Health Care Service

Health care professionals have also contributed to the development of the various disciplines. Medicine was established in the early times of the health care history and aims at treating diseases to improve the health of patients. With the help of medicine, health care workers studied the causes of illnesses and sought ways to prevent them, which led to the development of preventive medicine. In addition to causative agents and harmful environments surrounding people of today, how to protect human health from these adverse factors has become the major topic of another discipline called public health. Lastly, but not least importantly, community health is a discipline dealing with the promotion of health at the individual and community level. Health care professionals have played a beneficial role, with their knowledge and

skills, in the process of disease treatment, rehabilitation, and prevention, as well as the protection and promotion of health, thereby making healthier and longer lives possible.

The start of nursing care dated back to the beginning of human history. Development of various health care disciplines have also prompted nursing care to branch into a number of fields closely associated with each medical department and then evolved into adult, child, maternal and community nursing. Different disciplines have different nursing care needs, which have been reflected in the training of nurses. Indeed, nurses are most in number among health care professionals and provide most services in the entire health care process ranging from disease treatment, rehabilitation and prevention to health protection, and promotion. But it should be noted that nursing care is lacking in leadership despite its size and importance. Few people, professionals and the general public alike, understand or acknowledge nursing leadership in making healthier life possible, because the influence of the nursing care community is virtually non-existent in the government decision making process or the health care system.

4. Nursing Care System as a Health Care Subsystem

The government of a country provides a health care system to ensure its people enjoy good health. A health care system, changed or developed by policies, intends to deliver health care services to its people in order to improve their health. A health care system consists of service and financing systems.

4.1 Health Care Service System

A health care service system includes a production system (input), a provision system (process), and a performance evaluation system (output).

4.1.1 Health Care Production

First, it involves the training and education of health care workers. There are wide-ranging jobs such as physicians, dentists, traditional medical doctors, nurses, midwives, pharmacists, dietitians, medical technologists, radiologists, physiotherapists, dental technicians and nurse aides, etc. Their job is making people healthier through their own works and interactions with other health care professionals. The system produces more nurses than any other health care workers.

Second, it refers to the establishment of health care facilities such as hospitals, clinics, midwifery clinics, pharmacies, and public health centers. Although there are about 67,000 facilities in Korea, there are no nursing care facilities run by nursing leadership except for the primary health care posts in rural areas, which is typically operated by a single nurse.

The third part is the production of medicines and other supplies and equipment. Although they are being developed and produced to meet the needs of patients and the health care community in general, it is assumed that the voice of nurses have not been heard adequately in the development of medical supplies that would be essential for nursing care.

Lastly, the production of skills and knowledge is related to this function of a health care system. Such production refers to research and development, publication, IT-leveraged exchanges of knowledge and skills. The nursing care community has developed nursing into an academic discipline, being actively involved in R&D and publishing works in partnership with training institutions, research centers and academic societies.

4.1.2 Health Care Service Provision

When personnel, facilities, knowledge, medicines and other supplies are made available, they should be organized to ensure effective delivery to people who need them. Well-organized health care is essential for the optimal use of health care resources. Health care services should also be provided in a way that makes it easier for people to use.

Health care services can be organized according to different categories. These categories include: specialty (medical hospital, dental hospital, traditional medical hospital and pharmacy, health center, etc), operator (the public or private sectors), region (urban or rural, etc), social class (poor, or minority, etc), kind of disease (cancer or communicable disease, etc), level of disease (acute or chronic conditions), severity (ICU or accident, etc), referral (primary or secondary, etc), gender (male or female) and age (child or adult, etc).

Medical care services are being provided under the leadership of medical doctors in the public or private hospitals and clinics. Likewise, dental and pharmaceutical services are made available by the leadership of dentists and pharmacists, respectively, in the dedicated facilities. The provision of nursing care services, however, is not organized by the leadership of nurses in health care system. Instead, the nursing department has been established as a subsystem of medical care system, dental care system and traditional medical care system. Accordingly, the leadership of nurses in the present health care system is minimal. This is also true in the public health centers whose major role concerns disease prevention and health promotion. Given the fact that the provision of nursing care is controlled by medical leadership or healthcare leadership and is not being provided in the dedicated nursing facilities, it is extremely difficult to find the evidence that a series of healthcare services such as treatment, rehabilitation, prevention, protection and promotion are being provided under nursing leadership.

Because of the lack of facilities dedicated to nursing care services, however, it is difficult to discuss how the nursing care service provision system should be. The only exception is the primary health care posts in remote areas where a

resident nurse is providing primary services to deal with common symptoms and chronic conditions.

4.1.3 Evaluation of Health Care Performance

The goals of effective health care service delivery include promotion of human health, improvement of professional health care services and the development of national health care policies. Likewise, nursing care services should help improve the well-being of people and the quality of services as well as policies. For example, the performance of nursing care services can be measured in such areas as customer satisfaction, quality control and government policies. Given the lack of nursing care facilities and policies, however, measurement of nursing care performance is a difficult task.

4.2 Health Care Financing System

4.2.1 Sources of Funding

Sources of health care funding include i) the National Health Insurance system, ii) payment from consumers, iii) state budget and other public resources, and iv) community funds. The share of each funding source varies from country to country. In some countries, the consumers contribute most to the funding while in others the public sector is the largest contributor. But one thing in common is that there are multiple sources of health care financing. Understanding the economic dynamism of a health care financing system is of significance, because different main sources would lead to different social consequences. Since nursing care has no separate financing system, it is subject to health care financing.

4.2.2 Modality of Payment

Modality of payment is closely related to the type of a given national health care system. For a health care service provided, possible payment methods include fee-for-service, RBRVS (Resources-based relative value scale), capitation, salary, case-payment, and global budget. A similar payment system needs to be developed for nursing care. Currently, the Korean system combines fee-for-service and RBRVS for the about 4,500 kinds of medical services. In this system, the "nursing care fee" is a single payment item encompassing all the different nursing care services.

4.2.3 Financial Management

Financial management refers to a series of processes to maintain financial sustainability of an overall health care system. The National Health Insurance Corporation and the Health Insurance Review Agency are two major institutions that are dealing with the collection of monthly payments from clients, payment of medical service fee, and evaluation of insurance claims. The financial management system for nursing care deals with collection and payment of nursing care service fee as well as review and evaluation of the quality of services.

Table 1. Comparison of Health Care System and Nursing Care system in Korea

Health Care System	Medical Care System	Nursing Care System
Service System 1. Production Professionals Facilities Medicines & equipment Skills and knowledge 2. Health care delivery By specialty By operator 3. Performance evaluation National health status Quality of health care services Quality of national health care policies	1. Medical care production Physicians Medical hospitals & clinics, Drug & medical supplies R&D, publication, 2. Medical Care Delivery Medical Hosp. and clinics by physicians' leadership 3. Medical performance Health status of people Quality of medical care services Quality of national medical care policies	1. Nursing care production Nurses, Few of nursing facilities Few of nursing supplies R&D, publication, 2. Nursing care delivery Nursing care as a medical care sub-system in hospital. 3. Nursing performance Comfort & Wellness of people Quality of nursing care services Quality of national nursing care policies
Financing System 1. Financial sources National Health Insurance Clients Government 2. Modality of payment Fee-for-service RBRVS Case-payment Capitation 3. Financial management Financial control for sustainability	1. Financial sources National Health Insurance Clients Government 2. Modality of payment Fee-for-service and RBRVS for about 4500 medical services 3. Financial management Financial control for sustainability	1. Financial sources National Health Insurance Clients Government 2. Modality of payment nursing care fee as a single payment item RBRVS 3. Financial management Financial control for sustainability



5. Healthier Life with Nursing Leadership in Health Care System

There is no doubt that people can live healthier lives when the nursing care community, which has the largest number of professionals providing most services in the health care system, is more actively involved in a series of processes for health care policy making and health care system operation. Unfortunately, however, the presence of nursing care is not felt strong enough within the present health care system. Even though there is a growing demand for nursing leadership especially in the area of health protection, and promotion, little effort has been made to meet such a need, thereby failing to accomplish the goal of health for all. That is why nursing leadership is necessary to establish the presence of nursing care in the health care system and ensure healthier lives for people. For this, following strategies are proposed:

5.1. Identity of nursing care services should be defined in relation to the health care services ranging from disease treatment, rehabilitation and prevention to the protection and promotion of health

5.1.1. What is the role of nursing care in treating disease conditions? Medical doctors are responsible for bringing physical functions of patients back to normal conditions, which is the most important leadership they should assume in disease treatment. But it is nurses who help relieve the patients' pain and attend to their day-to-day needs—eating, bathing, resting, sleeping and excreting—while patients in hospital are often exposed to a number of physical and mental stresses. Considering such an important responsibility of nursing care, it is essential to develop the disease-specific nursing skills, knowledge, equipment, devices and materials and make sure that they are delivered to patients through effective nursing leadership. In a way, hospitals can be considered as hotels for patients. Nurses are responsible for making stay at these “hotels” more comfortable and pleasant than hotels for ordinary healthy people.

5.1.2. Patients in rehabilitation should do their daily activities such as eating, excreting, sleeping, resting, bathing, working and exercising in a healthy way while they are receiving the necessary health care services. With that in mind, nursing knowledge and skills for rehabilitation should be developed, which in turn will be put into practice through informed policy initiatives. For example, the development of clinical skills and knowledge as well as necessary equipment and materials will be beneficial not only to people with disabilities but also to the patients who have gone through resection of diseased parts of organs or organ transplantation.

5.1.3. Nursing knowledge and skills for prevention, protection and promotion should be developed and delivered in nursing facilities by nursing leadership.

5.1.4. Nursing leadership that aims to align the responsibility of nursing care with changing needs of client populations should be developed and reflected in national health policies.

5.2. A nursing care system should be established as a subsystem of the health care system.

5.2.1. Nursing care facilities such as nursing hospitals and centers should be available within the health care service system.

5.2.2. Medicines and devices which would assist effective nursing care should be developed. These will help patients have a comfortable stay in the hospital and ultimately lead to a healthier life.

5.2.3. Rational compensation schemes need to be established by calculating nursing care fees based on service, RBRVS, case, time, and capitation in health care financing system.

5.2.4. Evaluation methods should be developed for nursing care services and fees.

5.3. The nursing community should make efforts to better understand health care policies and make active involvement in policy-making process in order to establish nursing care as a policy agenda. To develop nursing care into a health care subsystem, greater involvement in the design, implementation and assessment of national health care policies will be indispensable.

5.4. Every Korean citizen has the right to use nursing care services. Education and public awareness programs should be available to let people know about their rights as well as responsibilities with regards to good health and use of nursing care services.

Conclusion

The nursing care community should pay more attention to building nursing hospitals, clinics and centers in order to help establish the nursing care system as a healthcare subsystem and to providing comfortable and pleasant services to the patients as hotel staff do to their clients. Sharing the best practices will certainly be useful to accomplish these goals. When the nursing leadership is well established, we will also get much closer to the goal of a healthier life from birth to death.