



INVESTIGATING SOCIAL NECESSITIES AND DISPOSITION FOR THE NEED OF A “FAMILY” NURSE

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ABSTRACT

The teachers and tutors from the Medical College – the town of Sliven, a branch of the Thracian University designed a project, aiming at proving the necessity of legislative regulating of the status of a “family” nurse on the grounds of a sociological research and investigation. Three independent private public inquiries were carried out, with their help the opinion of the General Practitioners was defined, of the “Health- Care” specialists and of the customers of “Health – Care” services. The conclusions are that the “family” nurse has an important, significant place in the structure of the Medical System. The “Health – care” specialists should be able to improve their qualification and knowledge in the medical colleges, on a correspondence course-educational basis, in various direction and majorings. To make a proposal at the Ministry of Public Health for the regulating of a legislative status of the “family” nurse in the team for medical service, in co-operation with the general practitioner. In the National Frame Contract, it is necessary to regulate the general and the specific specialization-oriented nursing cares.

Key words: General Practitioner, “Family” Nurse, Specialist in “Health-Care”

INTRODUCTION

In the conditions of the health – insurance system, most of the nurses are employed in the team of the general practitioners and in the capacity of “family” nurses introduce and offer their care in respect of subsequently promotion of the health prophylaxis, prevention, cares at the patient’s home after a hospital or medical treatment and so on (1-4).

The teachers and tutors from the Medical College, the town of Sliven, a branch of the Thracian University, made up and designed a project, by which we state our firm hope, which will play an important role in the legislative settling of the matters, connected with the activities and the working practice of the “family” nurses. These activities will be legally exercised, in close connection with the general practitioners or individually (1-4).

The aim of the project is to prove the necessity of legislative regulation of the status of a “family” nurse by social investigation and research in the town of Sliven.

The task is for the project to be carried out in two stages:

The first stage: Carrying out a private sociological investigation of the Public necessities and disposition for the need of a “family” nurse.

The second stage: Making a proposal at the ministry of Public Health for the Regulation of the status of the “family” nurse.

The private sociological investigation was carried out practically by three individual inquiries.

The aim of the first inquiry – investigation is to find out the general practitioners’ opinion of the necessity of a “family” nurse.

MATERIALS AND METHODS

The inquiry card, which was made up contained 16 questions. Fifty-one doctors were inquired from the town of Sliven. Some

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answered the questions pointing out more than one answer. Of the inquired the greatest is the number of the percentage (70%) of the general practioners employees since the introduction of the Health – Insurance System (In Bulgaria since 01.July.2000). That gives us the conviction that all the answers are truthful as they are answered by doctors who know the situation quite well and are well acquainted with the existing problems. Even higher is the percentage: (76%) of the inquired doctors, working as individual practioners for initial medical aid, and (24%) work in a team and group practice. Among the inquired the greatest is the number (nearly 80%) of those who medically serve enough patients – from 800 to 2000 patients, which guarantees the correct answer to the inquired questions. Most of the general practioners have acknowledged majoring – specialization - pediatry (56%), followed by the internal diseases specialists (18%). The greatest is the number of the inquired general practitioners who have working medical experience of more than 10 years (53%), up to nearly 10 years of work-experience are 25% and up to 5 years of work experienced doctors are also not less in number (16%).

Most of them, more than half of them (53%) answered the question “Are you acquainted with the Health- Insurance System in other countries?”, confirming, admitted that they are aware of them, which proves that the doctors are interested in the Health Insurance Systems in other, various countries and in what advantages are possible to be derived from them. A proof of it are the various proposals they make for the enrichment and improvement of the activities of the present Health Insurance System in our country now. Many of them make a proposal for an alternative Health Insurance System on a volunteer basis, where as the “family“ nurse would be the connection, the person – in-charge, the bond between the now-existing hospices for care of very diseased patients, for faciliating written work, the wish every patient to own a booklet, containing the capital fund-data, formed by the health insurance paid taxes and the sums are to be used by the insured. In this way the patient will be able to address or see another general practioner by paying out of his\her own capital fund.

Most of the general practioners (82%) answered the question “Do nurses and other specialists communicate constantly and closely with the patient and his\her family?”

with: “Yes, they do.” and agree with it. This makes us come to the conclusion that the nurses who work in a team with general practioners are good collaborators and employers who contribute a lot to their difficult and responsible tasks, as far as patients are concerned, whom they serve every day.

The high percentage (88%) of the inquired general practioners answered that there is a need of developing specialized nursing cares and finds an approval in the interesting proposals for the necessities of a further, additional eduacation in the following directions:

Well-qualified, timely cares in domestic conditions at home (59%), working with newly-born babies (41%), prevention of illnesses and diseases (47%), dispensary keeping watch (43%), work with terminally diseased (43%), educating chronically ill and invalids and their families (41%), providing psychological and physical comfort and convenience of the patient while he\she is at home (24%).

RESULTS AND DISCUSSION

We find it important to mention that the Medical Colleges in Bulgaria, the Medical College in the town of Sliven includingly, with their bases and modern equipment, with the well – qualified stuff of teachers and tutors are able to organize post – graduation education of those nurses.

Most of the general practioners are convinced in the necessity of legislation regulated status of the occupation and the position of a “family“ nurse in the team for Medical service in the Initial Medical Aid (69%), (18%) of them do not know how to answer and only (13%) of them do not find such a necessity important and answer negatively.

With the second private inquiry the “Health Care“ specialists’ point of view was investigated, concerning “Health Cares“ for the need of a “family“ nurse. For this purpose an inquiry was made up, containing 17 questions and items. The inquired were 50 specialists of “Health Cares” from the town of Sliven with different status and education, at various age, all of them working in diverse areas of Medical Service, which gives us the right to consider correct and adequate their answers. The percentage of the Medical Specialists (88%) who consider that the scope of their competence should be enlarged is

great. Ninety-two (92 %) of the inquired consider that it should be an additional priority in accordance with their basic education. That is their point of view: innovation in their occupation – majoring (60%), computer studies (42%), specialized cares (36%), general medicine (32%), initial nursing aid (24%), cares for children in home – domestic conditions (20%), social medicine (18%), communication (16%), cares for old people (14%).

Obviously the inquired are interested in the contemporary modern fields and areas, included in the College Curriculum. This shows the strive and inspiration of the “Health Care” specialists to improve their skills and education, to be in accordance with the current reform in the Health care which, carried out at present, and in this way to contribute to it to settle down quicker, in order to improve the people’s health.

Most of the inquired (66%) prefer would like to attend classes organized into a correspondence course on live for post – graduation education and qualification.

Absolutely all of the inquired (100%) are convinced that there is a need of a “family” nurse in a team with a general practitioner.

With the third inquiry, containing 10 questions the opinion of 50 residents of the town of Sliven was investigated, concerning the need of a “family” nurse. Most of the customers of Medical cares (40%) answered that they are content with the state and the quality of the Medical service, only partly content with it are (22%) of them. The next question was answered affirmatively (86%) of the inquired find it necessary there to be a nurse as a part of the general practitioner’s team, aiming at improving the quality of the Medical service. The nurse is an indispensable part of the Medical Team with her/his specific skills and abilities and professional responsibility.

A great part of the customers of Medical Services (72%) share the opinion that the nurse should know both the health and the social problems of the patients she serves to (32%) of the inquired have the opportunity to communicate with the nurses from their

general practitioners’ teams and (26%) of them are not given this chance: it is a pity. This kind of activity is a challenge, of course, demanding professional moral and ethics, high level of knowledge and intelligence and practical skills to carry out the medical nursing cares successfully.

According to eighty percents (80%) of the inquired the nurse should do her/his best and contribute highly to the prevention activities.

CONCLUSIONS

1. The “family” nurse has an important, significant place in the structure of the Health System.
2. The “Health Care” specialists should be given the opportunity and the right to improve their qualification and education in a medical College, attending a correspondence course, in various directions.
3. The process of changing the direction of the “Health Care” specialists’ activities from treating and healing to promoting prevention of health should continue.
4. To make a proposal at the Ministry of Health for the legislation regulation of the status of a “family” nurse in the team of the Medical Service, in co-operation with the general practitioner. The general and the specific functional duties and care of the nurse should be stated and regulated in the National Frame Contract.

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