Editorial

The essentiality of nursing in modern health systems

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Since Florence Nightingale, the essentiality of the nursing profession has seen a constant expansion; particularly, the variation and contextualization of this profession over time and across societies has laid the foundations of the nursing discipline1. Nowadays, the essentiality of nursing is constantly being supported by the concept of need and the ability of the nurses to respond to it (i.e., in terms of education, care, rehabilitation, and end-of-life support). The concept of need was dominant in the early stages of nursing care theorization.

The essential nature of nursing can be drawn from the three fundamental questions that define nursing as a scientific discipline and contextualize it over time: What do nurses do? How? With what results?2 In order to answer these three questions today, an analysis of the recent progress of the healthcare systems is pivotal. Specifically, the last decade has been characterized by a significant epidemiological transition that includes longer life expectancy, socioeconomic improvement in many countries, and the introduction of new technology, which in turn, have improved the caring process.

The National Health plans and the World Health Organization (WHO) place the nursing profession at the center of future healthcare, particularly at the center of a proactive healthcare system in the community. In The State of the World's Nursing 2020 report presented for the World Health Day, the WHO made "a stark reminder of the unique role that nurses play and a wakeup call to ensure they get the support they need to keep the world healthy".3 However, the problem of excessive workload and staffing continues to be the "two elephants in the room" (i.e., those problems that everyone knows but prefers to ignore)4 that can only be solved by investments, scientific evidence, and nursing leadership⁵.

The International Council of Nursing (ICN)

and the WHO jointly recommend more urgent significant investments in the nursing profession in order to fully express its potential, which is not exclusively confined to hospitals, but also in contexts of home care and community settings^{5,6}. To become the "essential nurses" that the healthcare systems demand today, nursing leaders should give equal importance to both patient and nurses' outcomes4. Researchers have sufficient data to demonstrate the significant relationship existing between the nurses' and patients' outcomes; for example, a poor work environment, determined by excessive workload and nursing burnout, is highly likely to translate into adverse patient outcomes⁷.

Nurses must dwell on deep reflection into the nursing discipline so that it is scientifically grounded and devoid of feelings and values. Contemporary nursing articulates the concept of response to the patient's needs through "fundamental care". Contextualizing essentiality of nursing today means providing fundamentals of care according to a broad and strategic vision, synergistically aligning fundamental care with nursing-sensitive indicators (i.e., the patients' and nurses' outcomes)8.

Today, across the health care systems, there is a need to make visible that providing high-quality fundamental nursing care is particularly complex and something that only some nurses can ensure9. It is necessary to measure and reassess the "essential care," in the context of scientific knowledge and personal responsibility for the consequence of any act committed or omitted (missed care)10. The literature has repeatedly shown that nurses omit these activities because they prioritize others perceived as more specialized, technological, and less "obvious" in situations of time constraints^{11,12}.

A few research studies show that nurses only

sometimes consider fundamental care as an essential part of their work; consequently, part of these activities are usually provided by healthcare assistants¹³. Other studies also underline an excessive distance of the nurses from the patients' needs and a subsequent increase in dissatisfaction with their job and intention to leave¹³.

Nursing leaders are called upon to manage these aspects in such a way as to prioritize not only the needs of patients but also those of the nurses. This phenomenon of invisibility of fundamental nursing care carries the risk of undermining the essentiality of nursing, with severe consequences for nursing education. In nursing education training, basic care is often implicit or invisible; notably, it is taught as an introductory part in the first year of the curriculum and rarely addressed in the second and third years14; moreover, nursing students themselves classify fundamental care as "just common sense"9. This may generate an erroneous way of thinking in students because they may be prone to consider basic care as just a set of simple activities which, once learned, do not require to be continuously updated by scientific knowledge, or reassessed periodically9.

To ensure complete and effective management of the fundamental care needs of patients and the essentiality of nursing, there is an emergent need to start with the education of nurses as healthcare professionals. The approach possibly includes a thorough review and restructuration of the undergraduate nursing curricula, to make them closer to people and capable of responding to their health needs today, like in the past¹⁵.

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