

# The role of training nurses in view of the economic crisis

**Magdalena KRAWIEC**  
Wyższa Szkoła Medyczna w Kłodzku, Poland

## **Abstract:**

**Aim:** Securing a proper functioning of a health protection system is one of the most important issues of a social policy all over the world. Improvement of the quality of health care depends on the education system and the quality of education provided to health services. The shortage of nurses is historically rooted and for many years temporary solutions have been arranged to promote the profession of a nurse. Employment in health services requires knowledge and professionalism as this profession entails responsibility for health and human life. In view of the economic crisis in the health care system related to a growing shortage of nurses it is significant to educate the biggest number of health service employees.

The beginning of professional nursing in the first half of the 20th century is related to the rise of first nursing schools and the introduction of random education forms aiming to relieve shortages in the nursing profession. At the turn of the century we observe various dimensions of this deficit which has existed for a long time and has been part of the health care and education systems. This paper analyses universities providing nursing education and shows the extent of this crisis in this profession.

**Design / Research methods:** The paper is a case study based on Polish economy. In this work, author uses statistical methods and comparative analysis.

**Conclusions / findings:** The improvement of the quality of the health care provided and work conditions through decreasing the patient-nurse ratio poses a challenge in front of universities training medical services which play a significant role both in promotion of the studies as well as the profession of a nurse considering the fact that the number of people interested in joining the profession.

Moreover, among universities with accredited nursing programmes there are private medical higher education schools which unlike public schools do not receive funding for training nurses so nurses have to invest in their education themselves. In view of an approaching catastrophe is it not worth to increase expenditure on higher education and fund teaching this deficit profession also in private schools of higher education?

**Originality/ value of the article:** The publication helps to organize and improve the medical schooling and to propose of reconstruction the health system in Poland.

**Limitations of research:** This paper does address the problem of education nurses.

*Key words: nurses, medical schooling, an economic crisis, a health care system.*

**JEL:** A120, I190, E320

## 1. Nurse training system

Nurses constitute the most numerous group among health care employees as well as the closest people to the sick and their families. Professional assistance, concern, care, support in suffering and enduring sickness difficulties make nursing a profession of public trust. At present a nurse is a health care employee with required qualifications rendering caring, medical, preventive, diagnostic and rehabilitation services. Nurses are obliged to promote health education and health. Work of a nurse was defined as a profession only in 1935 when the authorities of the Republic of Poland approved a Nursing Act (Ministry of Health 1935). It was then that nurses were supposed to cope with prevention and health education apart from taking care of the sick. Due to the prior lack of a precise definition of the word “nurse”, there were no clearly specified activities to be performed by a nurse so next to educated nurses hospitals used to hire people with low qualifications as hospital aid as opposed to qualified nurses considered as supervisors of the sick (Ministry of Health 1935).

Nursing education has a rich background and developed scientific basis. Initially it was a charity run mainly by nuns. First professional nursing came into existence in Europe and the North America at the turn of 19th and 20th centuries during great economic, social and political transformations in the world (Wolska-Lipiec 2016). Nurse Florence Nightingale was a predecessor when it comes to education.

The first nursing school was opened in 1895 at a General Hospital in Lvov. Preparation for this profession required an eight-month course and the graduates had problems with finding a job despite an already occurring deficit in this profession. It resulted from problems with financing hospitals and the lack of money for salaries (Dzierżak et al. 2002).

The first School of Professional Nurses run by the Daughters of Charity of Saint Vincent de Paul was opened in 1911 in Cracow. The studies took 2 years. The school educated nurses over the years 1911-1921 (interrupted by World War I). It was a pattern and highly respected school contributing to development of nursing (Matoga 2011). Development and enhancement of nursing education was definitely affected by a huge progress in medicine and the related curing methods introduced in the twenty-year period between the wars. It was then that nursing was considered a profession, legal bases and the scope of authority and duties were provided to create a curriculum.

In 1921 in Poznań a Higher School of Polish Red Cross Nurses and Hygienists was opened as initiated by Janina Żniniewicz, chair of a Great Poland District of the Polish Red Cross. The studies took 2 years comprising a theoretical and practical part and involved a

## THE ROLE OF TRAINING NURSES IN VIEW OF THE ECONOMIC CRISIS

modern form of nursing education on a university level. After the war the school became state-owned and in the beginning of 50s it was deprived of an academic status (Musielak, Samborski 2011).

At the same time the Warsaw Nursing School was opened as initiated by the authorities of Warsaw, the University of Warsaw and the Ministry of Public Health. It aimed to provide military institutions and facilities run by the Polish Red Cross with well qualified nursing staff (Jeziarska et al. 1994).

In 1923 the Nursing School at the Orthodox Jew Hospital at Czyste district opened as initiated by the Charity Organization Helping Jews, the American Red Cross and the authorities of Warsaw (Podgórska-Klawe 2008). In 1925 the University School of Nurses and Health Carers (later Hygienists) in Cracow was set up to resume the so called “old” nursing school organized by the School of Professional Nurses run by the Daughters of Charity of Saint Vincent de Paul. It was the first institution whose staff was constituted by solely Polish nurses (Zahradniczek 2011). During the period of II Republic of Poland nursing education was already on a high level and well prepared nurses joined medical Staff of hospitals. However their number did not satisfy current needs. In 1938 about 6.5 thousand nurses worked and only 5 thousand held a nursing diploma, there were only 2 nurses per 10 thousand inhabitants (Górajek-Jóźwik 1998).

Another school to teach nursing was The School for Social Nurses in Poznań started by the Patients’ Funds Union in 1932. Its activity was interrupted in 1934 by reorganization of Social Insurance resulting in liquidation of Patients’ Funds. The students continued studying at the Polish Red Cross Higher School of Nursing (Poznańska 1988: 88). In 1936 also in Poznań the Catholic Education Institute opened a Private Catholic School of Nursing which later became state-owned (Council of Ministers 1949).

The outbreak of World War II changed nursing education as almost all schools providing nursing education were closed. Education was provided by the Warsaw School of Nursing whose name was changed by the permission of the occupier into the City School of Hospital Nursing. In 1943 the Nursing and Midwifery School and the University School for Nurses and Midwives in Cracow were opened in secret not to inform the Germans. After three-year training the graduates were qualified to work in the profession of a nurse and a midwife (Piotrowski 1984: 13-15). According to estimates in 1945 in post-war Poland there were about 7 thousand nurses out of which 2 thousand graduated from a nursing school – about 2 thousand (Poznańska 1988: 88).

Another form of education involved training the so called „junior nurses” introduced in 1949 by the Polish Red Cross as commissioned by the Ministry of Health which was later transformed into two-year schools for “nursing assistants”. These schools were closed in the 60s and their graduates attained full entitlements having supplemented secondary education (Kaniewska-Iżycka 1988: 28-31).

In 1959 4-year nursing secondary schools were established which later in 1965 were transformed into 5-year medical secondary schools. Applicants who held a primary school certificate were admitted to a medical secondary school and graduates attained general secondary education and were prepared for the profession of a nurse (The Act of 15 July 1961). Nursing education also witnessed the shortage of teaching staff so in 1957 a Teachers’ College of Medical Secondary Schools was set up. Teaching nurses at the University level began in 1969 when Nursing Studies at Lublin Medical University was established pursuant to a directive of the Minister of Health and Welfare. Admission was subject to a maturity exam, graduation from a nursing school and at least 2-year work service (Ministry of Health and Welfare 1969).

Then on the basis of a Directive of the Ministry of Health and Social Care dated 19th July 1972 concerning organizational changes in the Medical University in Lublin a Nursing Department was formed leading to a master’s degree in nursing (Ministry of Health and Welfare 1972). Until 1974 education was provided on the full-time basis. Since 1975/1976 applicants have been admitted to part-time studies in teachers of nursing who graduated from Teacher’s College of Medium Medical Staff (Bulanda-Kordas 1975: 10).

Another Nursing Department was created in 1975 at the Medical University named after Karol Marcinkowski in Poznań pursuant to a Directive of the Ministry of Health and Social Care dated 14<sup>th</sup> April 1975 (Musielak 2005: 13). The third University to open a Nursing Department was a Medical University in Katowice. It was initiated by the nursing circles supported by professors and activists (Fojt, Dubowska 2000: 10). In 1975 also the Medical University named after Nicolaus Copernicus in Cracow established a Nursing Department (Ministry of Health and Welfare 1975). This University was the first to introduce two-level nursing studies in 1998/1999 academic year. The fifth Nursing Department was opened in the Medical University in Wrocław (Ministry of Health and Welfare 1978). At present there are 90 universities to be accredited to provide nursing education (Ministry of Health 2017).

Currently nursing education is conducted as part of Bachelor’s studies and supplementary Master’s studies. Nurses may improve their skills in two-year specialization programmes and qualifications and specialist courses or PhD studies (Brudecka 2007: 13).

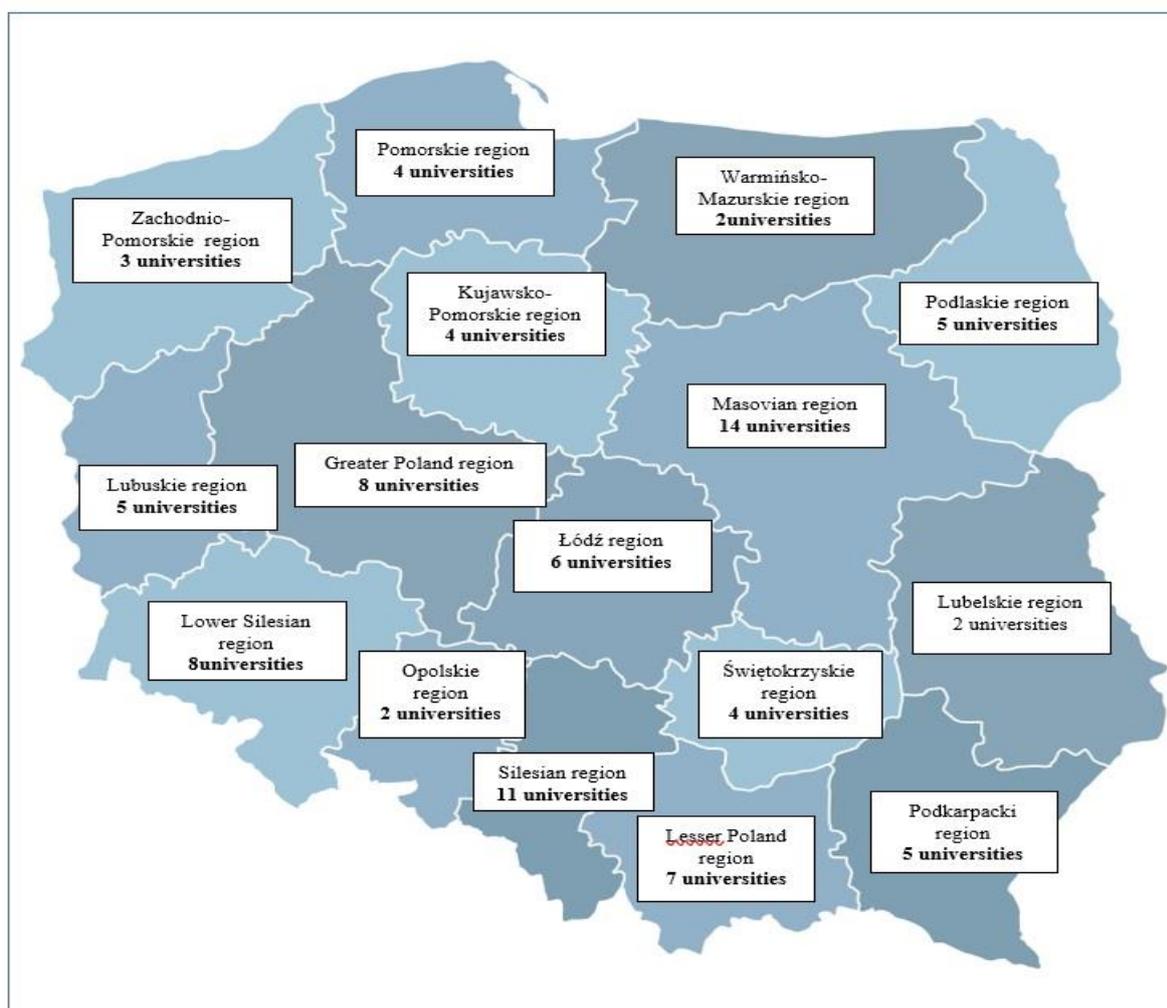
Due to a growing lack of nurses, the Ministry of Health enables nurses and midwives with a maturity certificate and who graduated from medical secondary schools to supplement their education in the form of bridging studies at medical universities providing nursing field of studies.

### 2. Medical universities teaching nursing

At present (2018) there are 523 various types of universities in Poland (POL-on 2017). These are universities teaching numerous professions not only medical ones. Detailed analyses have shown that only 90 are accredited to provide nursing education (Ministry of Health 2017). Only 18 are medical universities teaching medical professions including nursing.

The administration map of Poland below shows the number of universities teaching nursing in particular regions.

**Figure 1. The number of universities providing nursing programmes**



Source: own work based on Ministry of Health (2017).

According to the analysis of the above data, the most universities with an accredited nursing department in 2018 are located in the Masovian region, 14 of them to be precise whereas in the Silesian region there are 11 universities providing nursing education. Another regions to situate 8 universities with accredited nursing departments are: Lower Silesian region, Greater Poland, Lesser Poland. In Łódź there are 6 of them while in and lubuskie, podkarpackie, podlaskie there are 5 universities training students at a nursing department. Regions which have 4 universities providing such training are named as follows: kujawsko-pomorskie, pomorskie and świętokrzyskie. Zachodniopomorskie regions have 3 universities teaching the profession each. Less numerous regions which have 2 universities providing such training are named as follows: opolskie, lubelskie and warmińsko-mazurskie.

Significant information obtained from the Central Statistical Office data which needs highlighting is popularity of the nursing profession among students. Only in 2013/2014 academic year in 78 schools in Poland there were 25.7 thousand students studying nursing the most of them in Masovia, Silesia, Lesser Poland and Lublin region.

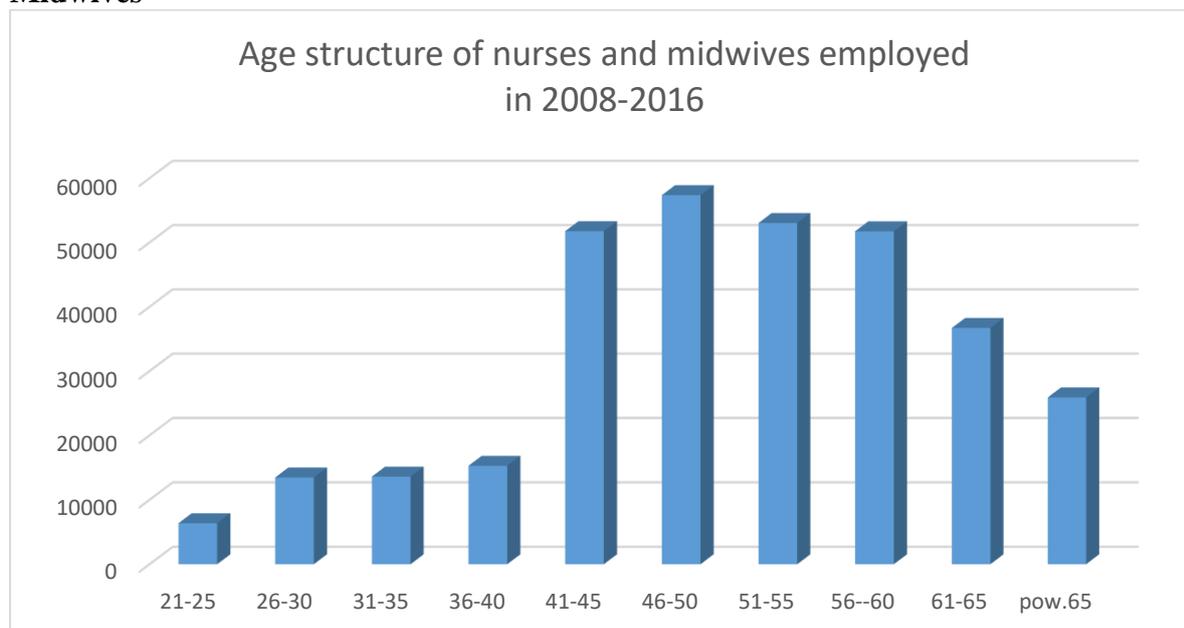
### **3. Economic crisis in the profession of a nurse in the health care system**

According to its definition an economic crisis constitutes an economic phenomenon which began over the years 2007-2008 in the United States and involved an economic breakdown stopping development of the economy.

Analysing numerous data we may say that a crisis ratio in the profession of nurse in Poland is very low and ranks Poland on last positions among other countries. For example it should be mentioned that in Switzerland there are about 17 nurses per 1000 inhabitants, in Norway 16 nurses, in Germany about 13 whereas in Poland little over 5 nurses per 1000 inhabitants. Despite the forecast decreasing population of Poland the nursing ratio will not increase as the number is going down faster than a demographic slump in Poland.

A current economic situation in Poland and in the world markets of health protection concerns the shortage of nurses. The biggest threat is posed by the age of nurses in Poland. A figure illustrating the scale of the problem is presented below.

**Figure 2. Age structure of nurses registered in the National Chamber of Nurses and Midwives**



Source: NIPiP (2010).

Considering the above chart we can see that 46-50 year olds constitute the biggest group of nurses then 41-45 and 51-55 and 56-60 year olds. They are likely to retire in the near future. This fact confirms the lack of young staff replacing the nurses growing old.

The next data presented by the Chief Chamber of Nurses and Midwives in Poland shows that 80 814 nurses will retire until 2020 whereas 19 954 nurses will start working in the profession. Such a situation denotes that in 2020 the Polish Health Services will face the shortage of nurses amounting to 60 860 nurses (NIPiP 2010).

The ageing society also affects a worse economic situation in the health services market caused by insufficient number of nurses. According to the Central Statistical Office data in 2020 over 60 year olds will constitute 25.9 % and their number will grow most in the nearest decade. On the basis of the publication of the Central Statistical Office concerning the duration of life, the average lifespan of a male was 71 years in 2007 and of a female 80. In 2016 the average lifespan of a male increased by 3 years and of women by a year. The forecast for 2035 indicates that “in 2035 men will live 6 years longer whereas women will live 3 years longer as compared to the present” (Central Statistical Office of Poland 2018a). Problems with securing nursing personnel also result from decreasing expenditure on health services which led to redundancies during 2008 economic crisis.

Nurses constitute the most numerous personnel in health services. Unfortunately this profession is not perceived as a key investment in economic development but a burden for the

state budget. That is why, salaries of nurses in Poland are not adequate to a huge work overload and responsibility for human health and life. Low remunerations also result in migration of nursing graduates who choose working abroad on more favourable conditions. The shortage of nurses is a global phenomenon and negatively affects the operation of the entire health care system nevertheless the number of nurses has risen in Poland over the recent years. This is reflected in the number of people per one nurse in the country. The number of nurses is presented in the table illustrating the population of a particular region as compared to the number of nurses and midwives over the years 2012-2016 (Central Statistical Office of Poland 2018b) allowing the calculation of persons per one nurse in a particular region.

In the table, I am showing the number of persons per one nurse in particular regions over the years 2012-2016.

**Table 1. The number of persons per nurse in individual regions**

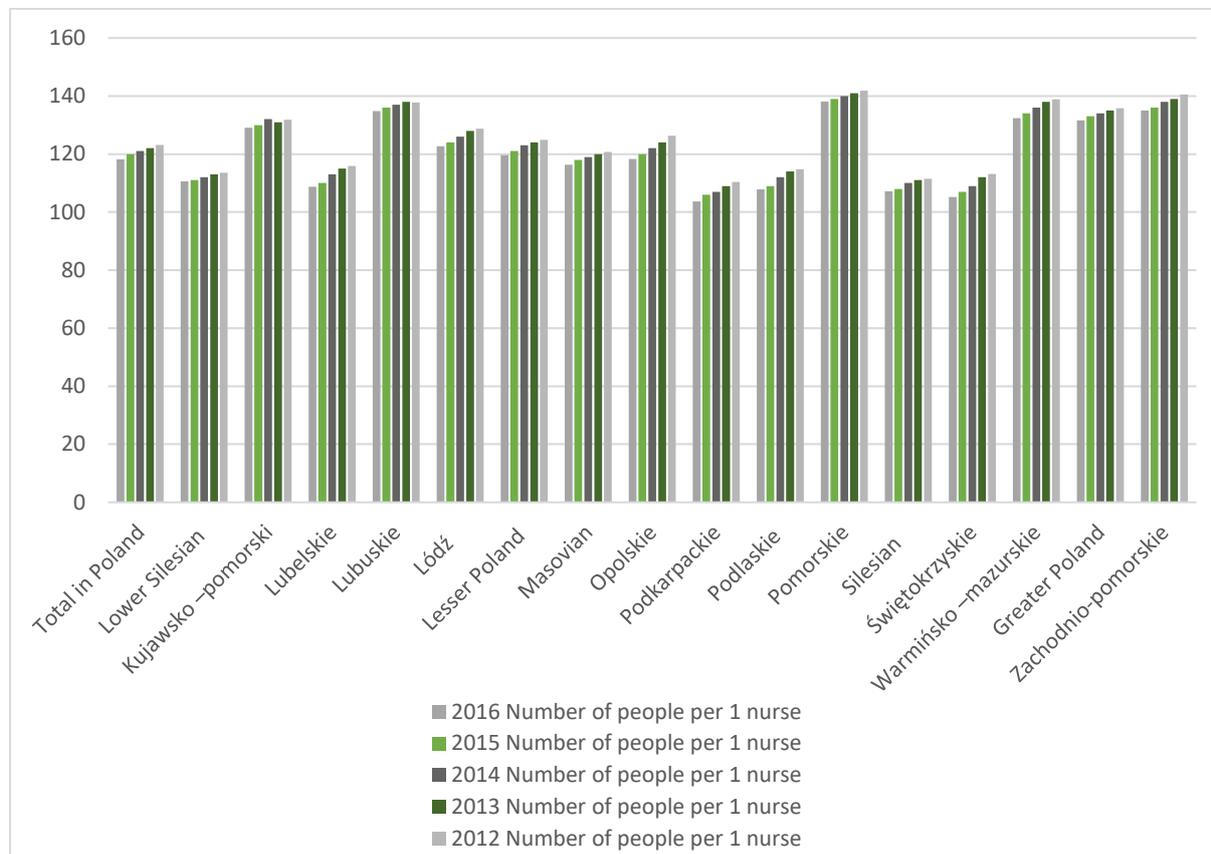
REGIONS	2016			2015			2014			2013			2012		
	Population 30.06.2016	Number of nurses and midwives	Number of people per 1 nurse	Population 31.12.2015	Number of nurses and midwives	Number of people per 1 nurse	Population 31.12.2014	Number of nurses and midwives	Number of people per 1 nurse	Population 31.12.2013	Number of nurses and midwives	Number of people per 1 nurse	Population 31.12.2012	Number of nurses and midwives	Number of people per 1 nurse
Total in Poland	38426809	325201	118	38437239	321471	120	38495659	317976	121	38533299	314853	122	38538447	312883	123
Lower Silesian	2903812	26256	111	2904207	26084	111	2909997	25920	112	2914362	25783	113	2916577	25693	114
Kujawsko –pomorski	2084524	16145	129	2086210	16000	130	2092564	15840	132	2096404	15982	131	2098370	15916	132
Lubelskie	2135715	19634	109	2139726	19378	110	2156150	19113	113	2165651	18905	115	2171857	18749	116
Lubuskie	1017450	7546	135	1018075	7493	136	1021470	7471	137	1023317	7402	138	1023158	7426	138
Łódź	2488417	20272	123	2493603	20106	124	2513093	19876	126	2524651	19702	128	2533681	19677	129
Lesser Poland	3376329	28223	120	3372618	27814	121	3360581	27389	123	3354077	27052	124	3346796	26791	125
Masovian	5356838	46034	116	5349114	45347	118	5316840	44716	119	5301760	44180	120	5285604	43780	121
Opolskie	994489	8406	118	996011	8293	120	1004416	8208	122	1010203	8132	124	1013950	8029	126
Podkarpackie	2126824	20513	104	2127657	20156	106	2129294	19846	107	2129951	19529	109	2128687	19289	110
Podlaskie	1187587	11012	108	1188800	10882	109	1194965	10707	112	1198690	10559	114	1200982	10463	115
Pomorskie	2311469	16731	138	2307710	16576	139	2295811	16357	140	2290070	16187	141	2283500	16095	142
Silesian	4564394	42572	107	4570849	42211	108	4599447	42003	110	4615870	41607	111	4626357	41506	111
Świętokrzyskie	1254505	11925	105	1257179	11737	107	1268239	11598	109	1273995	11384	112	1278116	11298	113
Warmińsko –mazurskie	1437812	10863	132	1439675	10734	134	1446915	10637	136	1450697	10520	138	1452596	10458	139
Greater Poland	3477755	26414	132	3475323	26103	133	3467016	25831	134	3462196	25568	135	3455477	25450	136
Zachodnio-pomorskie	1708889	12655	135	1710482	12557	136	1718861	12464	138	1721405	12361	139	1722739	12263	140

Source: own work based on Central Statistical Office of Poland (2018b); the figures for the day 31.10.2016.

Analysing the above table it should be noticed that the most people i.e. 142 persons per nurse was observed in 2012 in pomorskie regions, the least i.e. 104 persons per nurse occurred in

2016 in podkarpackie. For the purposes of better presentation of the number of data in table 1 the author has drawn up figure 3 below.

**Figure 3. Number of persons per nurse in particular regions over the years 2012-2016**



Source: own work based on Central Statistical Office of Poland (2018); the figures for the day 31.10.2016.

According to the above data year by year there is a declining trend. The most regions over the years 2012-2016 indicate that there are fewer persons per nurse. Kujawsko-pomorskie region is an exception as there were more persons per nurse in 2014 than in 2013 and similarly in 2012 – 132, in 2013 – 131, in 2014 – 132, in 2015 – 130 and in 2016 – only 129 per nurse. In the analysed five-year period the average number of people per nurse was 121. Respectively in 2012 this number amounted to 123, in 2014 – 121. 2015 still shows a declining trend with 120 person per nurse whereas in 2016 there is a change by two persons namely 118 persons.

The analysis clearly ranks in zachodniopomorskie, warmińsko-mazurskie and pomorskie on high positions when it comes to the number of nurses per 1 person in the region. In zachodniopomorskie in 2012 there were 140 persons per nurse, in 2013 there were 139 persons, in 2014-138 whereas in 2015 there was a drop by two people i.e. 136 persons, in

2016 continued a decreasing trend amounting to 135 persons. In warmińsko-mazurskie region in 2012 there were 139 persons, in 2013 – 138, 2014 – 136, 2016 – 132. Pomorskie region observes the most people per nurse. In 2012 there 142, in 2013 – 141, in 2014 – 140 while in 2015 – 139, 2016 counted only 138 persons.

#### **4. Conclusions**

The improvement of the quality of the health care provided and work conditions through decreasing the patient-nurse ratio poses a challenge in front of universities training medical services which play a significant role both in promotion of the studies as well as the profession of a nurse considering the fact that the number of people interested in joining the profession.

Moreover, among universities with accredited nursing programmes there are private medical higher education schools which unlike public schools do not receive funding for training nurses so nurses have to invest in their education themselves. In view of an approaching catastrophe is it not worth to increase expenditure on higher education and fund teaching this deficit profession also in private schools of higher education?

The cooperation between the education system and local health care services in planning the number and development of medical personnel should play a key role in solving the problem of this deficit.

Access to studying nursing programmes should be improved by funding private medical schools. Such an approach will create a possibility of studying tuition free and will equalize education opportunities for the youth and will play a huge role in overcoming the shortage of nurses.

Apart from looking after the sick, nurses should take care of prevention and promotion of health. Under current circumstances they do not have time for that. If preventive actions became a priority for the ministry of health and overburdened nurses were not obliged to deal with prevention themselves, prophylaxis would be effective. As a result the need for securing nursing care would be much smaller in the future.

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## THE ROLE OF TRAINING NURSES IN VIEW OF THE ECONOMIC CRISIS

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