

Pacific Heads of Nursing & Midwifery Meeting

Réunion des chefs des soins infirmiers et obstétricaux du Pacifique

SPCNMOA SCOPING ROADMAP: IMPROVING THE QUALITY OF NURSING AND MIDWIFERY IN EDUCATION AND REGULATION IN PACIFIC ISLAND COUNTRIES



The WHO Global Strategic Directions for Nursing and Midwifery (SDNM) 2021-2025 provides the evidence-base for an interrelated set of policy priorities that can help countries ensure that midwives and nurses optimally contribute to achieving universal health coverage and other population health goals.

This paper provides justification for the development of a regional body, led by senior nurses and midwives, which will focus on improving the Quality of Nursing and Midwifery and Education and Regulation in Pacific Island Countries, WHO Scoping Study Roadmap. This is a response to both the SDNM 2021-2025, a result of multiple research studies conducted in the region over a number of years and the priorities developed by the Government Chief Nursing and Midwifery Officers (GCNMO) in the region.

This paper argues that the South Pacific Chief Nursing and Midwifery Officers Alliance (SPCNMOA) and the newly developed Pacific Heads of Nurses and Midwifery (PHoNM) forum provide a vehicle for improving health services and health outcomes in the region and are ideally positioned to lead the proposed regional quality improvement body.

1. BACKGROUND

Health outcomes and quality of health services in Pacific Island Countries (PIC) vary widely, with non-communicable disease the largest disease burden. Newer challenges include COVID-19, climate change and effective response to disasters, whilst older challenges remain unresolved.

Regional research has consistently shown health workforce education and regulatory systems are weak with limited numbers of educators, outdated curricula, education programs that do not match health security needs, and limited continuing professional development opportunities for nurses and midwives (1). The draft WHO Global Strategic Directions for Nursing and Midwifery 2021-2025 identified education, jobs, leadership and service delivery as strategic policy priorities for improving regional health outcomes (2).

Nurses and midwives make up more than two thirds of the regional regulated health workforce (1-4). Due not only to their sheer numbers but also to their transformative role at the front lines, nurses and midwives have the potential to optimise and improve individual and community health outcomes.

2. PROGRESS AND ACHIEVEMENTS

The SPCNMOA has become an important building block to strengthen health in the Pacific and has enabled effective response to the WHO policy in relation to strengthening nursing and midwifery(1). Eg *Policy Priority 1 Establish and strengthen senior leadership positions for nursing and midwifery workforce governance and management and input into health policy(1)*. Enabling action by the SPCNMOA included the provision of training and skills to the government chief nursing and midwifery officers, creating mechanisms for data reporting and convening stakeholders for data sharing and policy dialogue.

Policy Priority 2 – Invest in leadership skills development for midwives and nurses (1). This priority specified the need to invest in leadership-skills development for midwives and nurses. An example is the highly successful Australian Awards Fellowship mentoring program, funded by the Australian Government, designed to build leadership and partnerships across the Pacific (23). The enabling role of the SPCMNOA was vital to getting the Fellowship mentoring program running. The SPCNMOA co-designed proposed the program, supported funding submissions and, once the program had been funded, identified suitable potential and existing local leaders to attend.

2.1.2 Emergency & Disaster SPCNMOA has been involved with the Asian Pacific Emergency Disaster Nursing Network since its inception in 2007. The strong relationships, which have developed between members, have enabled fast regional support and response during disasters.

2.1.3 Representation at Global Summits Subsequent to the formation of the SPCNMOA, CNMOs from nine Pacific Island Countries were sponsored and supported by their Ministers of Health to attend WHO World Health Assembly (WHA) in 2019, thus further cementing their roles as potential leaders in the global health care arena (21).

2.1.4 Reviewing and defining the roles & responsibilities for Government Chief Nursing and Midwifery Officers The SPCNMOA was instrumental in reviewing and defining the original fining roles and responsibilities of GCNMOs (24) later developed by the WHO (25). During subsequent forums, GCNMOs' inputs and recommendations were compiled into a consensus statement, which was then endorsed by the Nursing and Midwifery Global Advisory Group (26).

3. CHALLENGES

3.1. Barriers to enabling nurses and midwives to gain appropriate authority and influence

Despite making up more than 60% of the global health workforce (and 74% in the Pacific region) (22), to date, nurses and midwives have not had a concomitant influence on health policy. Rasheed et al (2020) (27) in their extensive review of nurses' impact on health policy found that health hierarchies, gender power differentials and lack of confidence and skill all played a role in limiting nurses' contributions. They found that nurses tended to play the role of policy implementers rather than being drivers of policy change. Indeed, Asuquo et al (28) found that even policies that directly related to nursing were developed without considering a nursing viewpoint or input. An International Council of Nurses (ICN) survey in 2020 showed that although *'two-thirds (67%) of countries report having a GCNO 'focal point', many of these positions do not have the authority to advise and influence at a strategic level, and that the full range of responsibilities and resources associated with the GCNO role are essential to directly influencing health policy formulation. Some focal points are not even Registered Nurses'* (9). Further, results from research in Thailand (29) and the Pacific (30-32) provide evidence of high-quality health policy outcomes such as influencing the Nurses' Act and improving human resource deployment when nursing and midwifery leaders are explicitly included and consulted on health policy development.

While nurses and midwives have long taken their role as patient advocates seriously and sometimes at detriment to their employment (33) they have generally not been so successful at advocacy in government or global forums. There is consensus in the literature however, about the potential benefits for improving health outcomes if nurses and midwives were to become more vocal and engaged in developing health policies (34).

4. FUTURE DIRECTIONS

It is now time to embed chief nursing and midwifery officers in national and regional health policy development (37). The SPCNMOA (35) and the newly developed Pacific Heads of Nurses and Midwifery (PHoNM) (7) forum are ideally placed to provide a vehicle for improving health services in the region. Over a number of years, the SPCNMOA (36) has been at the forefront of developing nursing and midwifery in the region, advocating for nursing leadership.

Recommendations

4.1 Recommendations for governments:

- Continued to sustain commitment at ministerial, regional and national level for policy dialogue, investments and implementation of actions.
- Developing a regional approach to regulation, including accreditation, with links to country-based systems led by senior nurses and midwives, focusing on Improving the Quality of Nursing and Midwifery and Education and Regulation in Pacific Island Countries and Areas.
- Developing a coherent and transparent pathway that enables healthcare workers to move between the various levels of work and education e.g. nurses aid, community health worker, registered nurse, midwife, clinical nurse specialist, to nurse practitioner (3, 40)

4.2 Recommendations for development partners:

- Work with Chief Nursing and Midwifery Officers, ministries of health, SPCNMOA and SPC PHoN to provide technical and expert guidance and support as needed to progress the WHO Scoping Study Roadmap (3).
- Provide funding to support initial development of the practice and accreditation standards and regional body as outlined above.
- Support developing a regional approach to regulation, including accreditation, with links to country-based systems (10).
- Support establishing mutual recognition of qualifications and ease of mobility of nursing personnel across the region in line with WHO code of practice (38, 39).

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