



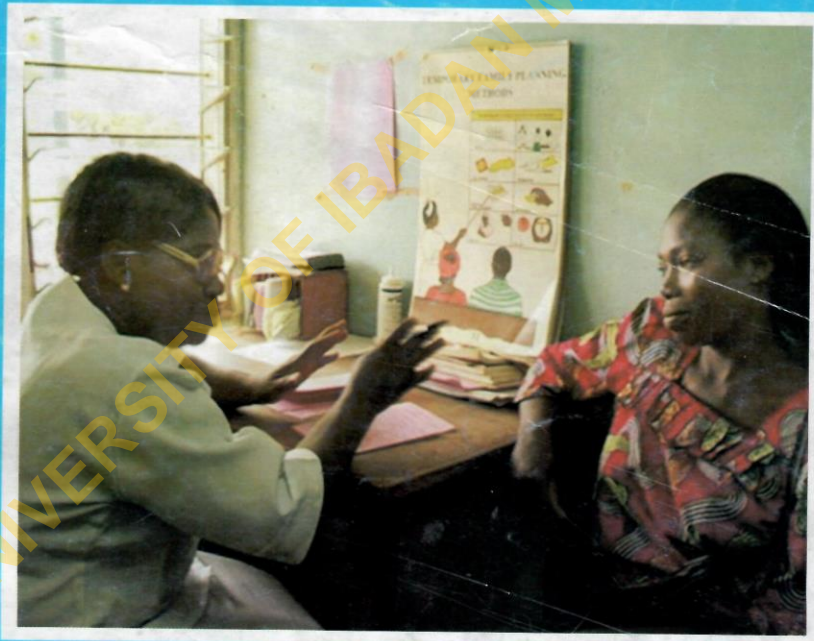
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Contents

1. Editorial

The Need for Effective Communication in Healthcare Industry	ii
West African Journal of Nursing, Board Members	iii
Instructions to Authors	iv

2. Research

(i) Surveillance of Surgical Site Infections in Operated Patients in a Tertiary Hospital, Nigeria Ohajuru Ijeoma Joy, Fajemilehin B.R., and Onipede A. O.	1
(ii) Socio-Cultural Factors Affecting Utilization of Health Services by Women of Reproductive Age in Agbowo Ikosi, Epe LGA Lagos State. Oluwatayo, Adeyemi Olufunmilayo, and Adejumo, Adejumo Olusola	16
(iii) How Many Nurses Work in Private Hospitals in Nigeria? A Study of Selected Hospitals in Zaria, Northern Nigeria Emmanuel Ejembi Anyebe, Mohammed Ibrahim Okeme, Vivian Ikem, and Hadiza Lawal,	28

3. Education

i. Quality Assurance: An Approach to Improving the Quality of Nurse Education in Pakistan Anwar Aziz, Udak Archibong, and Jeff Lucas.	39
ii. Ethical Issues Concerning Health Consumers' Right and Withholding Health Information from Clients Okanlawon F.A.	48
iii. Attitude of Nurses and Midwives toward 'Reformed' National Pension Scheme Joel Adeleke Afolayan, and R. B. Aboyeji	55
iv. Registered Nurses' Perception on the Use of Nonverbal Communicative Skills in Nursing Freeman Amewonye, and Anita Efua Davies,	66

4. Clinical Reports

i. An Overview of Consultant Nursing Specialist in Clinical Practice in Nigeria Adejumo, A.O., Adejumo, PO, Ilesanmi, RE, Ofi, AB, Oluwatosin, OA, Okanlawon, FA, Oyetunde, MO, Odetola, TD, Ndikom, MC, Awonuga, O and Ojewale, LC.	76
ii. Client Satisfaction With Out-Patient Care: A Study at St. Michael's Hospital, Ghana Veronica Dzomeku (Mrs), Asante Ernest (Mr), Obeng Eric (Mr), and Oppong Kwaku Duah (Mr)	83
iii. Knowledge, Health Beliefs and Use of Personal Protective Equipment against Tuberculosis among Gambian Nursing Students Haddy Tunkara-Bah, Chi-Ho Hsu, Shio-Luan Tsay and Hung-Ru Lin	95
iv. Self-Care Self-Efficacy, Glycemic Control and Quality of Life among Type II Diabetes Mellitus Patients in The Gambia Jainaba Sey-Sawo, Tsay, Shio-Luan, Kenneth, Kuan-Chia Lin, Tung, Hseng-Hsin, and Ousman Nyan,	107

AN OVERVIEW OF CONSULTANT NURSING SPECIALIST IN CLINICAL PRACTICE IN NIGERIA

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Abstract

As most health care systems around the world are undergoing major restructuring, nurses in Nigeria are moving at a slow pace. However, a giant stride was taken and history was made when the first set of nurse consultants were appointed in University College Hospital, Nigeria. The establishment of this groundbreaking post will help develop our health services and provide clear development opportunities for nurses at a time when the success of modernization of our services and implementation of new ways of working relies so heavily on nursing staff. This paper provides an overview of the consultant nurse specialist in clinical practice. Recommendations for successful implementation in Nigeria were provided.

Key words: Consultant Nursing Specialist, Clinical Practice, Nigeria.

Introduction

The International Council of Nurses' (ICN) definition of Nursing states that nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy, health systems management, and education are also key nursing roles¹. Nursing is, therefore, a **healthcare profession** focused on the care of individuals, **families**, and **communities** so they may attain, maintain, or recover optimal **health** and **quality of life** from **birth to death**. As such, **nurses** work wherever human beings exist in a large variety of **specialties** where they work independently and

as part of a team to assess, plan, implement and evaluate care.

Examples of some of the career routes open to nurses include practice nurse, nurse educator, **community nurse**, **health visitor**, travel nurse, **neonatal nurse**, nurse consultant and a host of others. Nurses can also work as **preceptors** and **mentors**, and within the higher education sector as lecturers. There is a rise of specialization in health care and developments in treatment which have provided additional opportunities for specialist nursing roles to evolve. Innovative nursing roles have therefore evolved to meet the emerging needs of a dynamic and ever changing service. The nurse consultant role is the thrust of this paper which presents a review of literature on this emerging concept in Nigeria.

The literature from the US more clearly defines the criteria required for specialist nurse consultant role, Hamric and Spross² have contributed to an understanding of sub-functions within specialist roles, identifying these as expert practice, education, consultation, collaboration, leadership and research with academic qualification as key to the development of cognitive, reflective and rational ability. The UKCC recommended that consultant nurse specialists should be defined as those who are expert within a specialty as opposed to simply working within one³.

Consultancy can be defined as 'an interactive process in which an identified expert assists

others by request⁴. This process may take many forms, but described by Schein in three different models⁵: The expert model, in which the consultant provides information or a service to fulfill an identified need. The doctor-patient model, in which the consultant diagnoses a problem and prescribes a solution. Process consultancy, in which the aim is to help the client to understand and act on events to improve his or her situation.

Caplan, on the other hand, identified four basic types of consultation in nursing⁶. Nurse-centered, in which a nurse seeks advice from a consultant on a care issue. Patient – centered, in which a consultant is asked to work with staff to manage the care of a particular patient. Programme – centered, in which a consultant facilitates staff development or educational programmes. Administration– centered, in which a consultant gives advice to management on nursing policy and practice.

There are arrays of models, types and patterns in literature but there is agreement among experts that nurse consultants should be involved directly in clinical practice, working as skilled change agents, expert communicators, educators and researchers, and that they have a minimum of post-graduate qualification in nursing and a thorough grounding in the discipline of nursing⁶. Thus the focus of the consultation may differ, as may the mode.

The idea of nursing consultancy is actually not new, Florence Nightingale worked as a 'consultant' for the development of services internationally, namely in New Zealand⁷. Nurses working as consultants in the provision of advice in psychiatric nursing were described as far back as in 1963⁸. In addition, a number of consultant

posts have also been designated in Britain^{9,10,11}. The characteristics of the work involved in the role have been described by Wright^{9,10} as follows:

- i. Mature clinical or professional judgment
- ii. Highly developed sense of accountability
- iii. Sensitivity and objectivity with decision-making skills
- iv. High-level interpersonal and communication skills
- v. Physical and psychological stamina
- vi. Analytical abilities
- vii. Ability to use initiative
- viii. Awareness of self, abilities, limitations and
- ix. High level of commitment to nurses and nursing

Nurse consultant posts are central to the process of health service modernization, helping to provide patients with services that are fast and convenient while spending certain percentage of their time working directly with patients, ensuring that the patients continue to benefit from the very best nursing skills. In addition, the nurse consultants are responsible for developing personal practice, being involved in research and its evaluation and contributing to education, training and development. Part of the consultation include; levels of learning, clinical experiences, placement, preceptorships, evaluation and capstone experiences to prepare the new generation graduates to work in the changing health care system. The consultation could include workshops and guest lectures. Continuing education and workshops can be developed in areas of consultant expertise and interest.

Core functions of the nurse consultant

The Nurse Consultants' roles according to the Department of Health^{12,13} are structured around four core functions that exemplify the following:

(a) An expert practice function

The Nurse Consultant must be able to deliver high quality care to patients, enable other practitioners to maintain professional expertise, and be able to exercise a high degree of personal autonomy within their role. They are also expected to spend at least half the time available in direct contact with clients, patients or communities. Generally speaking, some degree of “face-to-face” contact is essential within the roles of the Nurse Consultants at an appropriate strategic level. The Nurse Consultants need to be in touch with patients sufficiently to ensure that “reality” with regard to clinical practice is maintained, and that the Nurse Consultants could use direct feedback from patients’ experiences to reinforce good practice and discover potential areas for improvement. Other relevant areas of the expert function include involvement in audit and research which would cascade into improving delivery of care, working in proximity with practitioners, informing them of the most effective ways in which to deal with patients and informing them of the latest evidence influencing patient care¹⁴.

(b) Education, training and development function.

Nurse Consultants should be able to contribute to the training and education of others, establishing formal links with local education providers^{12,13}. They should also contribute to the development of qualified staff in their specialist fields. It is vital that they ensure that education of staff is an integral and ongoing part of their practice in their specialist fields. This is linked to the “expert practice” function, where the Nurse Consultants consider that their role was to ensure quality practice. Education of others might involve working alongside staff in their specialist area, as well as disseminating good practice learnt elsewhere. The development of formal links with the local universities providing pre and post graduate education for the nursing profession

should also be considered as essential if their roles are to effectively influence practice and service development.

It is deemed particularly important that the Nurse Consultants maintain and develop their networks in their specialist areas in order to keep up to date and be able to promote the latest trend in best practice for colleagues. It should be noted that the Nurse Consultants have access to other experts in their specialist field, and that these links are essential to develop staff locally. Examples include the dissemination of research findings, developing formal links with local universities to influence the education of nursing students, and in-house education programmes for staff in their own specialist areas. Also, the Nurse Consultants have a key role in the education and development of staff in other professions than nursing, for example, allied health professionals and medical staff, amongst others.

They are also considered to be a key “resource person”, enabling targeting of scarce resources to support research as well as the consequent development of services across their relevant specialist areas. Nurse Consultants are key link with universities and other educational providers with regard to course development as well as providing new ideas about educational needs and possible ways to meet these. This is considered to be a “multi-faceted role”, which might range from one to one advice, to supporting and identifying processes to instigate an improved system of care, as well as methods to improve staff skills and knowledge. It is important that the Nurse Consultants should be seen to have a close association with universities so that they could be seen to be actively involved in the pre and post

graduate education of the profession and for the benefit of service users and patients. The Nurse Consultants could be high profile change agents within their roles, influencing others from a variety of perspectives.

(c) Professional leadership and consultancy function.

Nurse Consultants should be able to demonstrate leadership skills which will support and motivate others, in order to continuously improve quality of care and standards of practice. They should be a source of expertise and knowledge for others in their specialist fields. This is a fundamental part of the Nurse Consultants' roles. There is the need to be a transformational leader in order to have significant impact in the various specialty areas and affect considerable change¹⁵. The ability to influence others through leadership style and skills, as well as other personal qualities, is also deemed essential to be effective as Nurse Consultants. They have a key role to play in mentoring as well as influencing policy development as well.

(d) Practice, service development, research and evaluation.

Nurse Consultants should contribute to the development of professional practice through the promotion of evidence-based practice and audit of standards of care. They should also have a role in research and evaluation of practice within their specialist fields¹⁶.

There are some overlap between this function and that of others, particularly the education, training and development function. Nurse consultants are key change agents in their specialist areas of care, both by their contribution to research activities, as well as disseminating and integrating new evidence based practices to colleagues. They are keys in identifying appropriate areas for research and supporting those who are to be involved in such research activities. All

Nurse Consultants should have been involved in research projects at one point or the other. Therefore, it becomes an imperative part of their role to ensure that the results of such research is implemented and audited within their specialist areas. They could develop methodologies to assist in the dissemination of any research or new initiatives in evidence-based practice.

The Nurse Consultants have valued abilities to develop their practice field. They are to facilitate significant changes in each of the specialty areas, and ensure major improvements in service delivery and clinical outcomes in many cases.

Challenges in the Nurse Consultants' Role

Meeting the emerging roles of nurse consultants is no doubt challenging. The challenges could be multifaceted and influenced by peculiar socio-environmental factors. However, some of these include:

(i) *Time:* The time to be spent in each area would vary greatly in any given period due to the nature of the work in which they will be involved, and the unpredictable nature of some of the demands upon their time. It is advantageous for the nurse consultants to keep "diaries" of a sample of a period of time spent in the four core functions, and which will depict a typical analysis for their subjective interpretation of their workload only. The issue of "direct patient contact" is also to be considered as a key issue with regard to time available for the other functions of their role.

(ii) *Coverage:* The job description of Nurse Consultants is quite broad, given the actual demands upon their time. The demands on their time by universities are extensive and difficult to

balance. In addition, many of the Nurse Consultants work across large domains and in a variety of locations. This presents challenges in meeting all the demands of the role. Therefore, they should all have more time to work and input at strategic levels with those planning and commissioning services in their specialist area.

(iii) *Perceived value and support of the role:* The role and responsibilities of Nurse Consultants may not be fully appreciated by colleagues, both within the nursing profession and their multi-disciplinary teams initially. However, as the posts yield dividends, it becomes clearer and gains more support and acceptance.

(iv) *The title "Consultant":* The title "consultant" may be problematic to some, as it could be confused with those of their Medical Consultant colleagues. However, the roles have significant differences, and thus colleagues and other stakeholders could misinterpret the expert practice function of the Nurse Consultants if such comparisons are made.

(v) *Recruitment and selection:* Nurse Consultants should have a minimum level of experience in managing staff as well as other resources, and have a minimum level of post-qualifying educational attainment. Applicants being considered for a Nurse Consultant post should have a minimum of Master's level qualification in Nursing, and should be working towards a PhD. This is a big challenge as post graduate nursing degree is hard to come by especially in developing countries.

(vi) *Clinical Supervision and Support:* There may be need for the Nurse Consultant to seek help from those considered to be experts within their specialty from within or outside the country in their first year in nurse consultant post.

(vii) *Clerical Support & Working Environment:* The Nurse Consultants will generally manage their own diaries, and endeavour to liaise with clerical support in order that

they could be contacted at any given time. The time that had to be spent on administration which could be dealt with by appropriate clerical support might present a source of frustration to the Nurse Consultants.

(vii) *Career opportunities:* Regarding the possible career opportunities for the Nurse Consultants, there is a concern that the role might possibly inhibit future career development. There was some debate as to the potential impact that this might have when considering future job moves from the Nurse Consultant role.

Benefits accruable in nurse consultancy

Various benefits have been noted where access to nurse consultants have been in practice. They are said to help maximize the financial efficiency of an organization, are time-efficient, provide cost – effective services and provide income generation through education and research supervision⁸. The role of a nurse consultant is centered around improving the quality of patient care. Post-holders need not only to provide advice, but are also 'involved in direct hands-on nursing'⁹. Consultant nurses have the administrative advantage of being able to get around bureaucracy and as such facilitate efficiency. They also have the advantage of contributing to the education of the new generation of clinical practitioners¹⁰.

Nurse Consultant posts were first introduced to Northern Ireland in September 2000. The establishment of these posts was intended to help provide better outcomes for patients by improving services and quality, to strengthen leadership and to provide career opportunities. To determine how existing posts were being developed and supported and to clarify any issues regarding the future development of the Nurse Consultant role, the Department of Health and Social Services

(DHSSPS) Nursing and Midwifery Advisory Group commissioned the Beeches Management Centre to undertake a review of the role¹³.

The review has confirmed that these roles, although in their infancy, have all made a significant difference in each of their specialty areas. Numerous service improvements and clinical developments have resulted from the appointment of Nurse Consultants and their involvement in longer term projects will also bring significant improvement in clinical outcomes and improved services to patients.

Nurse consultants, however, need establish their credibility, ensuring that they are available and that their specific areas of expertise are clear. Ways of establishing credibility as a consultant are to establish effective working relationships and to offer practical, theoretically sound, successful problem-solving strategies and clinical expertise. A first step for promoting consultancy involves educating staff about the consultation process and the consultative services available to them. Stevens¹⁷ identifies some basic consultancy functions: defining and/or resolving problems, offering expert advice on specific matters; acting as an agent for change; facilitating education; improving relations; and performing certain tasks requiring specialized skills.

Recommendations

Given the fact that nurse consultancy is still in its infancy in many societies, all nurses should promote awareness of the Nurse Consultant role, both within the nursing profession and in the entire health care industry. The need for further professional development through innovative research, education, and service provision in the areas of clinical care and multi-disciplinary collaborative roles would be imperative for capacity building and equipment for meeting emerging role demands in professional nursing.

Conclusion

Nurse consultants are academic, experienced, and specialized nurse leaders thrust with an extra role of meeting cutting-edge demands in critical aspects of nursing education, research and practice. Meeting this role demands within the context of a novel situation presents enormous challenges both to the nurse consultants, colleagues and other stakeholders. Expanding the traditional role of nurses in this respect demands re-orientation of the entire profession in the areas of curriculum development, career structure and total nurses' capacity development to meet the demands of the new role. When this is inculcated into policy development and planning in the nursing profession, nursing will ultimately meet up with developments in other health fields, yet better rested on evidence-based theories in prescribing and rendering scientific patient focused individualized care.

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**A good woman inspires a man
A brilliant woman interest him
A beautiful woman fascinates him
But it's the sympathetic woman who
keeps him.**