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For Post Basic BSc Nursing

As per the INC Syllabus

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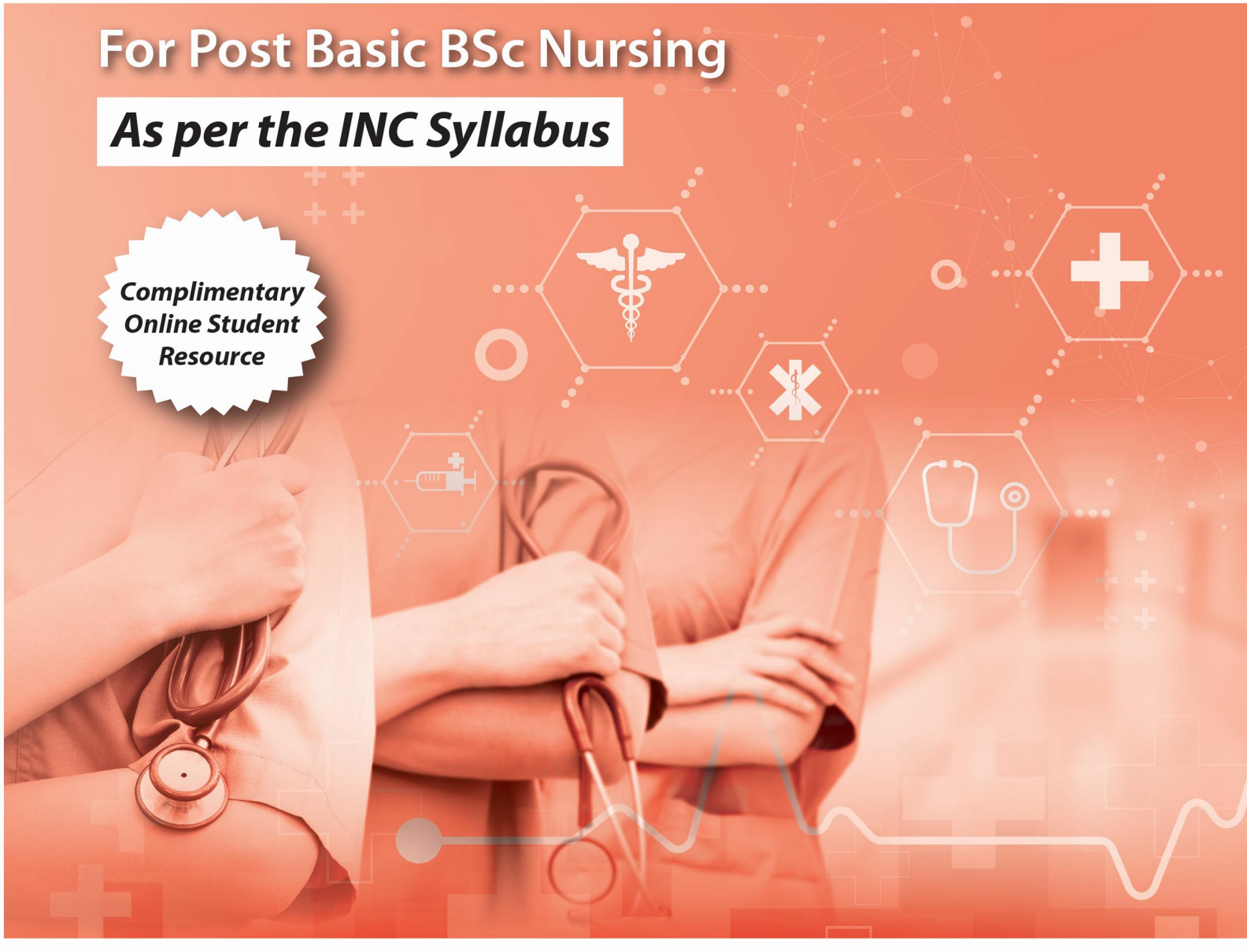

Jogindra Vati

3rd Edition

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CHAPTER 4

Professional Organizations and Regulatory Bodies

CHAPTER OUTLINE

- Professional Organizations
  - Concept and Meaning
  - Features of a Professional Organizations
  - Objectives of the Professional Organizations
  - Types of Professional Organizations
- Nursing Professional Organizations
  - Trained Nurses, Association of India
  - TNAI Associate/Affiliated Organizations
- Professional Regulation
  - Concept and Meaning
  - Components of Professional Regulation
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- Regulatory Bodies
  - Meaning and Definition
  - Aims of Regulatory Bodies of Nursing
  - Objectives of Regulatory Bodies of Nursing
  - Role of Professional Regulatory Bodies
  - Functions of Nursing Regulatory Bodies
- Types of Regulatory Bodies in Nursing
  - International Council of Nurses
  - Indian Nursing Council
  - State Nursing Councils/State Nurse and Midwives Registration Councils
  - Examination Boards and Universities
  - National Nursing and Midwifery Commission
  - Nursing and Midwifery Advisory Council
  - State Nursing and Midwifery Commission

Learning Outcomes

After completion of this chapter, the learner will be able to:

- Understand the concept of the professional organization, regulation, regulatory system, and regulatory body.
- Discuss the aims, objectives, and the role of regulatory bodies and professional organizations.
- Describe various types of regulatory bodies of nursing.
- Familiarize with the Trained Nurses Association of India and Student Nurses Associations.

Key Terms

Professional organization, regulation, regulatory system, regulatory body, Indian Nursing Council, State Nursing Council, Trained Nurses Association of India, National Nursing and Midwifery Commission, State Nursing and Midwifery Commission.

INTRODUCTION

Nurses are an essential workforce of healthcare organizations and the front-line clients' caregivers. Supporting nurses through their critical entry into the profession is not only suitable for the development of the nurse and the employer, but it is also essential to ensure that the patient is well. Regulation implies the intervention of the government to accomplish an end beneficial to its citizens. Each state has regulatory bodies that play a vital role in ensuring the public's right to quality healthcare service and supporting and assisting professional members. Regulatory bodies regulate and license health professionals such as nurses, doctors, pharmacists, etc. Nursing regulatory bodies receive their authority from the legislation. Nurses must register with the state nursing regulatory body as registered nurses and midwives and take licensure to practice.

Professional organizations help develop professions and raise the voices to regulate professions. Professional organizations have an essential role in maintaining standards of professional education.

PROFESSIONAL ORGANIZATIONS

Concept and Meaning

Professional organizations, professional bodies, and professional associations are used interchangeably. The professional organization comprises a group of professionals responsible for maintaining the legitimate

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practice of the profession. These organizations maintain standards of professional education. Professional and regulatory bodies are introduced in Canada for the dual purposes of protecting the professional status of practitioners and the public's interest and safety.

According to the Australian Council of Professions, a professional organization/body must represent a profession comprising practitioners of the related field. It is an organization of professionally competent individuals who perform social functions that they cannot perform in their capacity as individuals. It is an organization, usually nonprofit, that protects the interest of the public and professionals. It protects the public by maintaining and enforcing training and ethics standards, certifying a professional qualification, and maintaining academic discipline.

A professional organization is a body of persons that brings together members of the same profession to exchange information and experiences to keep the members updated and advance their profession. It is a professional organization where a group of persons of the same profession comes together to facilitate the achievement of specific purposes.

The nursing professional organization is a group of nursing professionals working together to maintain the quality of nursing practice, education, and research and safeguard the interest of the public and nursing community. These organizations/bodies maintain and enforce education and training standards and ethics in their professions, thus protecting the public. It may also certify professional qualifications in the specific field and maintain academic discipline.

Features of a Professional Organization

- Members engage in the same profession.
- It facilitates the achievement of specific purposes, primarily providing services.
- It controls entry into the profession and maintains its standard.
- It represents the profession and the public.
- It expresses the interest of professional members and the public.
- It concerns the career advancement of its members and profession.
- It advocates the profession's interest, deals with issues of a broader scale, and takes up an institutional-specific level.
- It has a legal identity and is recognized by the government.
- It can enter into agreements and is responsible for its actions.
- It uses dynamic methods of negotiation and bargaining.
- It grants designation and certification.
- Indirectly, it confers the benefit of employees' rights, claims, complaints, obligations, and opportunities to raise professional status and welfare
- It preserves professional standards by:
  - Supporting the development of social support
  - Promoting research and studies
  - Disseminating information through journals, newsletters, conferences, workshops, and seminars.
  - Good networking with other agencies and associations and through journal subscriptions.
  - Establishes a standard code of conduct policies for the improvement of the profession.

Objectives of the Professional Organizations

- To provide a shared vision and purpose to the profession.
- To promote a sense of commitment and motivation to its members.
- To develop a sense of command, their actions.
- To provide a platform for discussions and to exchange ideas and experiences about the profession.
- To establish a common viewpoint regarding the practice and standards of the profession.
- To give a voice to raise the profession's standard by organizing workshops, conferences, and meetings.
- To ensure professional credibility and power.
- To emphasize professional development by organizing continuing education and development programs.
- To develop and implement professional regulations and standards to protect the public.
- To produce competent professionals who can provide a high standard of care by reviewing the curriculum.
- To link with the consumers, policymakers, the government, and health professionals.
- To increase its membership by adopting various leadership strategies.

Types of Professional Organizations

The professional organizations are of the following types:

1. **Member-benefit professional organization:** These organizations exist to serve the benefits and interests of their members. It focuses on creating value for the members and abide by a code of ethics. It is the platform to discuss, exchange information, and advocate on behalf of members. However, it lacks legitimacy status.
2. **Designation-granting professional organization:** These organizations exist to serve the interests of their members and grant one or more designations per their qualifications. The certification is not the purpose of the organization/association; instead, members have the right to use the name.

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3. **Certifying organizations:** These organizations provide certification to those with established qualifications and serve the members' interests. These may not protect the investment of the public.
4. **Professional regulatory bodies:** Professional regulatory bodies are the professional organizations that serve the profession's interests and the public. These have legal status and authority and establish the standards of qualification, practice standards, and conduct. It has a professional code of ethics and regulations for the members. These are also certified bodies and grant certification for the requirement to practice. Indian Nursing Council and the State Nursing Council are examples of such professional regulatory bodies.

NURSING PROFESSIONAL ORGANIZATIONS

Trained Nurses' Association of India

Introduction

Trained Nurses' Association of India (TNAI) is the national professional organization/association of nurses. It began as an Association of Superintendents and a 'Trained Nurses Association' in 1908 in a decision taken at Bombay's annual Association of Nursing Superintendents, founded in 1905, at Lucknow. Later, the Association was inaugurated in 1909. Florence Mac Haughton joined as the first president of TNAI. On June 16th, 1917, the Association registered under the Registration Act No XXI of 1860. The Association of Nursing Superintendents and the Trained Nurses' Association clubbed together in 1922 as the Trained Nurses Association of India (TNAI). The Association has established the following organizations within its jurisdiction: Health Visitors' League (1922), Midwives and Auxiliary Nurse-Midwives Association (1925), and Student Nurses Association (1929–30). It is affiliated with the Commonwealth Nurse Federation. In 1910, TNAI's first issue of Nursing Journal of India published.

At present, there are 33 state branches of TNAI. The first State Branch was inaugurated in Delhi in 1949. After that, State Branches were inaugurated in Madras, Bombay, Uttar Pradesh (1950) and West Bengal (1952). Later, Tamil Nadu (1950), Bihar (1954), Punjab (1953), Andhra Pradesh (1954), Kerala (1956), Karnataka (1956), Assam (1957), Madhya Pradesh (1957), Rajasthan (1959), Odisha (1960), Gujarat (1962), Chandigarh and Goa (1968), branches established. In 1969, separate State Branches were formed in Haryana (1969), Himachal Pradesh (1973), and Punjab after these States attained separate statehood. In 1971, North Zone and North-East Zone Branches were formed: Nagaland (1978), Kashmir (1980), Mizoram (1980), Manipur (1981), Meghalaya (1982), Andaman and Nicobar (1990), Arunachal Pradesh (1995), Tripura (1997), Jharkhand (2004), Chhattisgarh (2006), Puducherry, Sikkim (2008), Uttarakhand (2008), Telangana (2015). Lakshadweep states is yet to be established.

Affiliation of Trained Nurses' Association of India

Trained Nurses' Association of India has an affiliation with other associations/organizations:

- **International Council of Nurses (ICN) affiliation:** TNAI remained affiliated with the International Nursing Council as the 8th Association in the world from 1912 to May 1995. However, due to the scarcity of funds, it became difficult to pay the massive subscription; it stands disaffiliated from the ICN.
- **Affiliation with Commonwealth Nurses Federation:** Student Nurses' Association, Health Visitors League, and Midwives and Auxiliary Nurse-Midwives' Association are affiliated with the Commonwealth Nurses' Federation.
- **Affiliation with Government Committees and Councils:** The views submitted by TNAI are considered the most authentic for the nursing profession in processing the findings of official committees such as the Bhore Committee and Mudaliar Committee. TNAI was essential in the High-Power Committee on Nursing and Nursing Profession (Report: 1987). The Central Council of Health (CCH) also consults TNAI for its recommendations on various aspects of the profession. The TNAI has many activities and links with the INC to promote nursing education and other professional aspects.
- **Affiliation with other Organizations:** It is affiliated with other associations like the Indian Red Cross Society, Indian Public Health Association, Association for Social Health, Indian Hospital Association, Federation of Delhi Hospital Welfare Societies, Tuberculosis Association of India, Indian Leprosy Association, and National Institute of Public Cooperation and Child Development.

Philosophy of TNAI

TNAI believes that good health is a fundamental right of every person, and it is the responsibility of health professionals, including nurses, to provide optimum health for each section of society.

Aims

- To upgrade and standardize nursing education.

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- To raise living and working conditions for nurses.
- To register qualified nurses as members.

Organization Structure

TNAI has its Officers, Executive Council, and Council Members.

- **TNAI Officers:** President, four Regional Vice-Presidents (Northeast, West, South, and North), one Secretary-General, three Assistant Secretary-General, and one Honorary Treasurer.
- **The Executive Council:** It comprises all TNAI Officers, Former Presidents of TNAI, Presidents/Secretaries of State Branches, Hony Secretary of the Health Visitor League, and ANM.
- **The Council Members:** It include TNAI Officers, former TNAI President, State/UT Branches' Presidents, and Secretaries. It has five co-opted members, seven Members ex officio, Hony Secretary of the Health Visitor League, and Auxiliary Nurse Midwife Association.

Membership

TNAI has registered life members, including registered nurses, retired nurses with training certificates, religious sisters, Health Visitors, ANMs, Multipurpose Health Workers, and SNAs to TNAI.

Benefits for TNAI Members

- Scholarships
- Medical assistance, assistance in selected critical illnesses
- Nurses' welfare grants
- Concessions in railway fare, registration fees for attending TNAI-organized national and State conferences and training programs, and accommodation in TNAI guesthouse.
- Free recruitment of placement in overseas European countries.
- The facility of a daycare center for the elderly
- Provides opportunities to present scientific papers at national and State conferences.
- Awards lifetime achievement awards to the deserved nurse
- Gives disaster relief funding to individuals at the state or national level.
- Incentives to enroll TNAI members.

Activities of Trained Nurses' Association of India

- Organizing workshops and conferences
- Granting scholarships and welfare funds
- Granting railway concessions to TNAI members
- Publishes Nursing journals, textbooks, and bulletins for the SNA unit.
- Support disaster-affected area nurses at the individual, State, National, or International level.
- Addressing and advocating issues of nurses' welfare to the government.
- Social welfare activities through Social-Economic Welfare Committee
- Association with funding agencies to generate funds.
- The inception of the Central Institute of Nursing and Research, daycare center, and elderly care home.
- Recruitment agency: Government-accredited recruitment agency for nurses seeking employment within and abroad.
- Jointly working on baby-friendly hospital initiatives, disaster preparedness, the role of nurses in policy making regarding the care of senior citizens, human rights, nursing ethics, and children's rights.
- Coordination with governmental, nongovernmental, and international organizations to perform educational and research activities on nursing concerns.

TNAI Associate/Affiliated Organizations

Health Visitor League

Health Visitor League (HVL) is an associate organization of TNAI, established in 1922. It continued in the mid-1970s and was replaced by the Association for ANM. It had 113 members by 1943. It has the following objectives:

- To uphold the dignity and honor of lady health visitors (LHVs)
- To bring spirit de corps among the LHVs
- To discuss professional-related issues and problems
- To deliver public health lectures and events
- To improve the standard of education and practice

Midwives and Auxiliary Nurse Midwives Association

The Midwives and Auxiliary Nurse Midwives Association is another associate organization of TNAI, established in 1925. It has the following objectives:

- To uphold the dignity and honor of Midwives and ANM
- To bring spirit de corps among the Midwives and ANM
- To discuss professional-related issues and problems
- To improve the standard of education and practice

Student Nurses Association of India

Introduction

The Student Nurses Association (SNA) is the organization/affiliated association of student nurses in India under the umbrella of TNAI. It was established in 1929 during the

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Annual Conference of the Trained Nurses' Association of India (TNAI). The Nursing Superintendent of the Government General Hospital, Madras, Miss LN Jeans, was this Association's first Honorary Organizing Secretary. Its first unit was established at the General Hospital, Madras, followed by Christian Rainy Hospital, Madras, and the Presidency General Hospital, Calcutta. Miss I Dorabji was the first SNAI Secretary and was replaced by the SNA Advisor in 1970. Mrs Narender Nagpal was the first SNA Advisor. In 2005, the designation was replaced by Deputy Secretary-General-cum-SNA Advisor. At present, there are about 900 Student Nurses Associations and 150,000 members.

Organizational Structure

- **At Unit/Institutional level:** SNA has a unit at the institutional level. The executive committee has an SNA President, who should be the Principal of the Nursing institution and has a TNAI membership. It has an SNA-Advisor elected from one of the faculties with TNAI membership, Vice-President, Secretary, Treasurers, and chairpersons/convenors of different committees elected by students during the General Body Meeting.
- **At the State level:** It has an SNA Executive Committee, consisting of the State TNAI President, who acts as an ex-officio member, SNA Advisor, Student Vice-President, Student-Secretary elected by all unit Vice-Presidents, and Secretaries of their State during State SNA Conference/Meeting.
- **At the National level:** It has an SNA General Committee at the National level. The TNAI President heads the committee members. The members are the Honorary Treasurer, Secretary-General, Deputy Secretary-General-cum-SNA Advisor, State SNA Advisors, Student-SNA Vice-Presidents, and Student-Secretaries.

Objectives of the Student Nurses Association

- To uphold students' dignity and ideals of the nursing profession.
- To promote a cooperative spirit among students.
- To furnish nurses in training with the advice in their course leading to the qualification.
- To aid in the overall development of nursing students.
- To encourage optimal achievement in the professional role of the nurse.
- To help in participating in educational and other co-curricular activities.
- To provide Foundations of National Student Nurses Association (FNSNA) scholarship, awards, and conferences.

Membership

BSc Nursing, GNM Auxiliary Nurse Midwives/Multipurpose Health Workers (Female) students can register online through their institutions.

Activities of the Student Nurses Association

- Organizes SNA conferences, meetings, and exhibitions.
- Organizes annual meetings for the student nurses.
- Encourages students to raise funds through various sources.
- Maintains SNA diary—a record of SNA-unit activities of various kinds.
- Awards the best two SNA diaries maintained by Unit-Secretary
- Awards special prizes to deserving candidates.
- Encourages students to take part in public speaking and writing by organizing various competitions at the State level.
- Facilitates students to undertake community projects, surveys, camps, health mela, and other related activities.
- Encourages students to advocate for the nursing profession through celebrating professional and nonprofessional events such as Nurses Week, Lamp Lighting, WHO Day, Women's Day, and other educational activities.
- Encourages students to take part in sports, recreational, cultural and other extra-curricular activities.
- Have discussions on professional issues of ANMs/Health Visitors/and Multipurpose Health Workers.

PROFESSIONAL REGULATION

Concept and Meaning

The word 'regulation' means rules and restrictions. Each organization frames its rules and regulations to the employees. These are the boundaries that need to be followed by each employee. The regulations are also to have control over the conduct. Professional regulation is the means to maintain order, consistency, and control in the profession and its practice. It is concerned with the promotion of the profession for the welfare of society.

The standards of nursing education, practice, and care of patients can improve through regulation and thus can improve the status of the nursing profession. The regulation of nursing, in other words, is at the very heart of the future of the profession itself.

Components of Professional Regulation

Quality, evidence, and safety are the three main components regulating nursing practice. Quality is a degree of

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excellence, provided and documented, based on the best knowledge available and achievable at a particular facility. Quality management is a continuous pursuit of excellence through constant process control at every step through standards and quality audits with the total commitment of the top management and the involvement of all staff. It aims to provide consumers with services of acceptable quality.

Nurses are accountable to society for the quality of nursing practice. Moreover, ensuring quality has become necessary in the healthcare system due to modern healthcare technology, increased competition, privatization, and awareness among the clients. They demand safe, evidence-based, and ethical nursing care from the nurses. Hence, nurses must adhere to the code of ethics, which forms the basis for regulation.

Elements of Professional Regulation

Quality nursing practice is only possible to achieve when there are nursing practice acts, well-defined standards, policies, procedures, rules and regulations, a code of conduct, and dedication and commitment on the part of nurses, which are essential elements of regulation. The organizations must design and implement activities to attain the needs and expectations of the individuals/families/groups/communities that require assistance from nurses to maintain and sustain their health and well-being on a competent, consistent, and continuous basis (INC, 2006).

Principles of Professional Regulations

- **Principle of purposefulness:** It means that regulation must reflect safe, competent, and ethical professional practice.
- **Principle of definition:** It refers to regulatory standards that should have clearly defined professional scope and accountability.
- **Principle of professional ultimacy:** It means that regulation and its standards should contribute to the profession's development with its potential social contribution.
- **Principle of collaboration:** It means that the regulatory systems must collaborate with the public, government, employers, and profession, its members, and other professions to develop professional standards.
- **Principle of balancing:** The regulatory bodies must design their regulatory system to balance the interdependent interests of the parties.
- **Principle of proportionate control/optimacy:** The regulatory systems must have proportionate controls necessary to achieve their objectives.
- **Principle of flexibility:** The regulation standards must be broad, flexible, innovative, and permissive to achieve their objectives.
- **Principle of efficiency:** Regulatory systems must most efficiently utilize resources and time to achieve the stated objectives.
- **Principle of universality:** Regulatory systems must follow universal standards of performance. These should provide professional identity and flexibility per local needs and circumstances.
- **Principle of natural justice:** Regulatory systems processes should provide justice and fair treatment for all parties involved.
- **Principle of transparency:** Regulatory bodies must be transparent in their activities. They should communicate information publicly so that all interested parties can make informed choices.
- **Principle of accountability:** Regulatory bodies must be accountable for their actions and be ready to give justification for their actions.
- **Principle of effectiveness:** Regulatory mechanisms must be valid to maintain the trust of the public, government, and profession.

REGULATORY BODIES

The regulatory system is a system that provides for the enrichment of care through improved standards of education, the development of practice, and the creation of codes of conduct and ethics. It is like the cardiovascular system of the body. As the human cardiovascular system is vital to life, a nursing regulatory system is also concerned with the lifeblood of the profession and its destiny. In India, the nursing profession has established its regulatory system through regulatory bodies.

Meaning and Definition

A regulatory body is an external organization empowered by legislation to supervise and control the educational process and outputs. They frame rules and regulations bestowed by statutory bodies. In other words, regulatory bodies are created by the government to regulate the qualifications and/or training of the professions/occupations. Unlike professional organizations/bodies, they do not offer professional membership. For example, the Indian Nursing Council (INC) is a corporate body constituted by the Central Government under Section 3(1) of the INC Act, 1947, which was enacted by bestowing statutory powers to maintain uniform standards and regulations of nursing education nationwide. It will

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be replaced with the National Nursing and Midwifery Commission under the National Nursing and Midwifery Commission Act-2023.

All health professionals, such as nurses, doctors, pharmacists, and other health professionals, are regulated and licensed by regulatory bodies as required by legislation. Each state has its own Nursing Council/ Commission, responsible for registering the nurses, acting as a coordinator, and helping maintain a uniform standard of Nursing Education in the State. All nurses must register and get a license to practice with the State-level Nursing Regulatory Body.

Aims of Regulatory Bodies of Nursing

- To control entry to the profession by specifying the required qualifications.
- To set, monitor, and enforce essential standards
- To improve and sustain education, training, and practice.
- To provide a framework for nursing practice
- To provide legitimacy, protection, and support to nurses
- To promote regulation of the profession
- To maintain a live resister of nurses and register for continued practice.
- To encourage nurses to participate in and influence public debate on health policy.
- To ensure that each of its practitioners is accountable to the public for nursing practice.
- To provide comparable labor regulations to guarantee and safeguard practitioners' working and remuneration systems.

Objectives of Regulatory Bodies of Nursing

- To protect the public by ensuring qualified and competent practitioners in nursing through certification, registration, and licensure.
- To define the scope and standards of education, training, and practice.
- To reflect and be responsive to the country's healthcare needs.
- To develop codes of ethics, professional conduct, job classification, and validation measures such as tests, certification, recommendations, and disciplinary proceedings.
- To provide equitable, fair, and responsible regulation through standards for practicing and developing criteria for assessing them, regulatory processes, and the right to appeal from the regulatory body's decision.
- Prepare strict regulations and place an effective monitoring mechanism, such as anti-ragging measures.

Role of Professional Regulatory Bodies

Each National/State regulatory body receives its authority from legislation, thus provides a vital role:

- To ensure the public's right to quality healthcare service by:
  - Setting and enforcing standards of nursing practice
  - Monitoring and enforcing standards for nursing education
  - Monitoring and enforcing standards of nursing practice
  - Setting requirements for registration of nursing professionals
- To support and assist professional members by:
  - Safeguarding the interest of the public
  - Safeguarding the interest of professional practitioners through association
  - Safeguarding its self-interest through having Act to maintain its own privileged and powerful position as a controlling body.

Functions of Nursing Regulatory Bodies

Regulatory bodies exercise a high degree of control and influence over professional affairs. It has the legal power to regulate the profession. It has varied functions **(Fig. 4.1)**:

- Accreditation of nursing institutes
- Registration of nurses within their respective states
- Setting standards for education and practice
- Developing a code of ethics and conduct
- Setting registration norms and procedures
- Setting criteria for expanding the scope of the profession

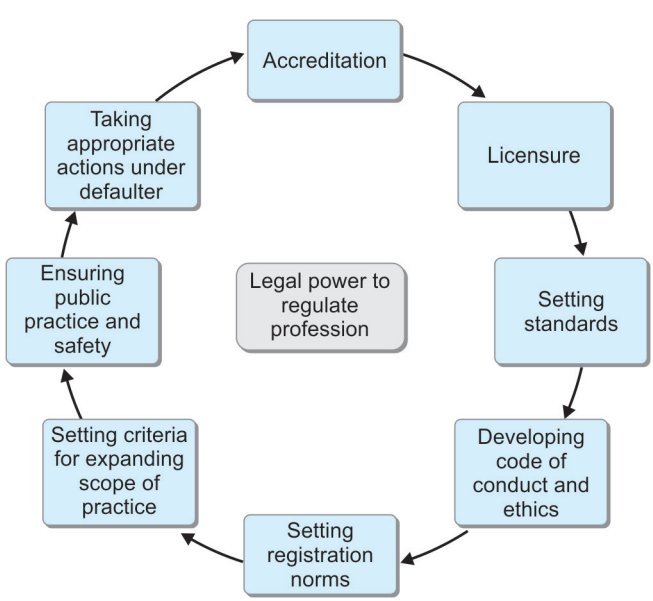

Fig. 4.1: Function of nursing regulatory body.

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- Ensuring competent and ethical practices by nurses
- Safeguard the public by communicating professional development and ensuring the services through qualified and certified nurses.
- Taking appropriate action against incompetent and unethical members and also against members impaired by alcohol, drugs, or a mental condition.
- Regular reporting to the government in particular cases such as the ground of termination of a nurse from employment.

TYPES OF REGULATORY BODIES IN NURSING

International Council of Nurses

Introduction

The International Council of Nurses (ICN) is an international regulatory body formed in 1899 as an independent, nonpartisan, nongovernmental council. It is the world's first international organization of National Nurses' Associations (NNAs) to represent nursing worldwide. It advances the profession, promotes the welfare of nurses, and participates in all policies. ICN has over 130 national nurses' associations, with over 28 million nurses. It works directly with nursing associations on essential issues of the nursing profession. Geneva, Switzerland, is its headquarters associated with WHO, ILO, World Bank, and other international nongovernment organizations. Indian Nursing Council is also one of its members.

International Council of Nurses Regulations

Its constitution (amended in 2023) states its purpose and objectives and describes the relationships with the members. The constitution includes 38 articles in VIII parts, i.e., general provisions; purpose and objectives; membership; dues; statutory bodies, organizations, and activities of the ICN; nominations and elections; final provisions specifying amendments, dissolutions of the ICN, and applicable laws; and transitional provisions for national nursing organizations having membership under the collaborative category.

Goals of the International Council of Nurses

- To promote health for all by informing and influencing the plan and implementation of health policies at the global and regional level.
- To strengthen the National Nursing Associations for nursing regulation, professional nursing practice, and socio-economic welfare of nurses.
- To provide strategic leadership for advancing the nursing profession.
- To encourage innovative growth of the profession by identifying, securing, and diversifying business and revenue-generating opportunities.

Objectives of the International Council of Nurses

The objectives of ICN are to influence nursing, health and social policy, and professional and socio-economic standards worldwide; to help member nursing associations to improve the standard and competence of nurses; to promote the development and advancement of nursing; to represent nurses and nursing internationally: and to establish, receive, and manage funds and trusts that contribute to the advancement of nursing and ICN.

Organization Structure

International Council of Nurses (ICN) has a Council of National Nursing Associations Representative (CNR), a governing body with one voting member of each association. The function of CNR is to set policy at the macro level, elect the Board of Directors, make amendments to the constitution, and set fees. It meets every 2 years at a venue decided by the Board and has congress every 4 years. ICN Board of Directors consists of the President, three Vice-Presidents, and members elected on an area basis. Each member can only serve a maximum of two consecutive terms of office. The President and at least three Vice-Presidents constitute the board's executive committee. The President is the executive committee chairperson and member ex officio of other committees. The Board can appoint a committee(s) for a specific purpose from time to time. **Figure 4.2** depicts the organizational structure of ICN.

The Board of Directors is the agent of CNR and sets and monitors established policies, including financial ones, as per the constitution. It recommends admission and readmission, suspends, terminates, and reinstates member associations. It appoints committees, receives and takes action on the committees' reports, appoints the Chief Executive Officer, and appoints two to four Trustees, two of whom shall be the President and Chief Executive Officer. ICN's Secretariat comprises the Chief Executive Officer and three departments: Finance and Administration, Nursing, and Communication and Events. The director, Chief Executive Officer, and ICN staff manage ICN and execute policy. An Audit and Risk Committee is an autonomous body that performs its duty independently and impartially from NCR, the Board, and ICN staff.

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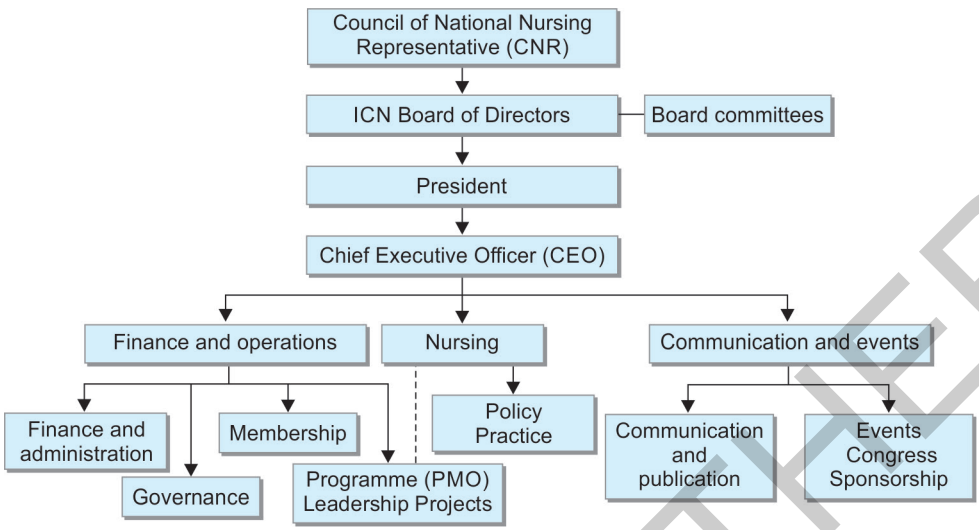

Fig. 4.2: ICN organization structure.

It has nine specialist affiliates: Council of International Neonatal Nurses (USA), International Federation of Nurse Anesthetists (France), International Federation of Perioperative Nurses (Australia), International Nurses Society on Addictions (USA), International Society of Nurses in Cancer Care (Canada), NANDA International (USA), Sigma Theta Tau International (Sigma) (USA), World Federation of Critical Care Nurses (Australia), and World Council of Enterostomal Therapists (USA). ICN recognizes and involves these specialist affiliates in policymaking, project development, and access to ICN global networks.

It also has two foundations: the Florence Nightingale International Foundation (FNIF), which is its premier independent foundation, established under Swiss law, and it supports the advancement of nursing education, research, and service. Another foundation is the International Council of Nurses Foundation (ICNF), a Swiss-based foundation for charitable, educational, scientific, and literary activities.

Activities of the International Council of Nurses

International Council of Nurses main activities are advancing nursing, nurses, and health worldwide through its policies, partnership, advocacy, leadership development, networking, congress organizing, special projects, and various programs. The main focus is on professional practice, regulation, and the socio-economic welfare of nurses.

Professional Nursing Practice

- Develops International Classification of Nursing Practice
- Facilitates communication through networks on common professional issues.
- Disseminates up-to-date and timely information on nursing education, practice, research, and administrative and regulatory issues.
- Provides a platform to exchange knowledge, expertise, and experience globally.
- Provides access to international resources.
- Creates a resource pool from network members.

Nursing Regulations

- Ensures high standards of nursing education and practice globally.
- Commissions an international study of nursing regulation as a guide for National Nurses Associations to establish or reform their regulatory systems.
- Establishes credential forum.
- Provides regulatory forum and develops a code of ethics for nurses.
- Organizes continuing education, meetings, and conferences.
- Develops regulations regarding publication, newsletter, guide, reports, monographs, and guidelines.
- Makes efforts to achieve equity and equality among society and profession.
- Conduct studies on various topics.
- Engages various specialist affiliates, partners, and members to develop policies and projects.
- Constitutes Observatory on Licensure and Registration to develop a global database.

Socio-economic Welfare

International Council of Nurses works on social issues within the workplace of nurses and actively campaigns

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against the exploitation of child labor through the workforce forum. It is also an International Center for Human Resources in Nursing (ICHRN).

Indian Nursing Council

Introduction

The Indian Nursing Council (INC) is a national nursing regulatory body in India aiming to establish a uniform standard for nurses, midwives, and health visitors. It is an independent statutory body under MoHFW (GoI). The existing legislative regulations of nursing and nurses' associations comprised the Indian Nursing Council Act of 1947 (XLVIII of 1947). It was enacted by giving statutory powers to maintain uniform standards and regulation of nursing education nationwide and was amended by Act No LXXV 1950 and Act No LXV 1957. The ordinance of the INC Act passed on December 31st, 1947.

The Council was constituted in 1949 and repealed after implementing the National Nursing and Midwifery Commission (NNMC) under NNMC-Act, 2023. With effect from such date as the Central Government may appoint on this behalf, the Indian Nursing Council Act, 1947 shall stand repealed, and the Indian Nursing Council constituted under Section 3(1) of the said Act shall stand dissolved. The National Commission shall be the successor in interest to the Indian Nursing Council.

Indian Nursing Council Regulations

The Council had its regulations called the Indian Nursing Council Regulations. It consisted of 12 parts that describe the terms and conditions for regulation.

- Part I describes the time and place of business for council meetings.
- Part II is about the conduct of the business meeting of the council.
- Part III describes the minutes of the council
- Part IV regarding election of members of the council
- Part V is on resignation and filling of casual vacancies
- Part VI describes the tenure of office and the powers and duties of officials.
- Part VII describes the executive committee
- Part VIII has a description of the committees
- Part IX describes the tenure of office and the powers and duties of the secretary and staff.
- Part X has a description regarding the inspection of examinations and training institutions.
- Part XI is about finance and accounts
- Part XII is about sales of publications

Aims and Objectives of the Indian Nursing Council

- To regulate training policies and programs in nursing
- To bring about standards of nursing training courses
- To set and monitor minimum standards of nursing education and training in various nursing programs.
- To prescribe the standard curricula of all nursing programs.
- To prescribe the conditions for admission to training courses, the examination standards, and other requirements.
- To recognize institutions/organizations/universities/nursing boards imparting various nursing programs.
- To recognize nursing qualifications awarded by foreign universities/institutions.
- To promote research in nursing
- To maintain a live register of nurses of all types through Nurses' Registration and Tracking System (NTRS) linked with Aadhar: Biometric Authentication, integrated web portal (https://nrts.indiannursingcouncil.gov.in).
- To empower nurses with a National Unique Identity Number (NUID).
- Issuing a nurse passbook comprising a complete history of nurse midwifery.
- To renew license/registration after every 5 years by attaining 150 hours of Continuing Nursing Education (CNE).
- To direct the State Nursing Council to adopt the NRTS for all categories of nurse registrations.

Purposes of the Indian Nursing Council

- To set standards and regulate all types of nursing education.
- To prescribe a minimum requirement for different nursing programs.
- To collaborate and communicate with State Nursing Registration Councils, nursing institutes, examination boards, and affiliated universities.

Constitution and Composition

Indian Nursing Council consists of the following members:

- One nurse enrolled in a (State) register elected by each State Council.
- Two members from nursing institutions (elected by the heads of recognized nursing institutions from among themselves).
- One Member from Health Visitors' institutions (elected from among themselves by the heads of Health Visitors' institutions).
- One elected Member of the Medical Council of India.
- One elected Member by the Central Council of the Indian Medical Association.
- One elected Member by the Council of the Trained Nurses Association of India.

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- One registered midwife/auxiliary nurse-midwife, elected by each of the State Councils in the four groups of states (i) Kerala, Madhya Pradesh and Uttar Pradesh and Haryana; (ii) Andhra Pradesh, Bihar, Maharashtra, and Rajasthan; (iii) Karnataka, Punjab Himachal Pradesh and West Bengal, (iv) Assam, Gujarat, Tamil Nadu, and Orissa.
- The Director General of Health Services (member ex officio) and other nurse administrators from Medical Directorate, Office of the Director General of Health Services as Members ex officio.
- Director, Indian Red Cross Society (Member ex officio), the Chief Administrative Medical Officer of each State other than a Union Territory (Member ex officio).
- The nursing superintendent (Member ex officio) from each of the states in the two groups in rotation (i) Andhra Pradesh, Assam, Maharashtra, Madhya Pradesh, Tamil Nadu, Uttar Pradesh, West Bengal and Haryana. (ii) Bihar, Gujarat, Himachal Pradesh, Kerala, Karnataka, Orissa, Punjab, and Rajasthan.
- Four members nominated by the Central Government (at least two be nurses, midwives, or health visitors enrolled in the state) register, and one shall be an experienced educationalist.
- Three members are elected by Parliament, two by the House of the People from among its members, and the other by the Council of States from among its members.

The elected or nominated members, other than a nominated President, have a term of 5 years from the date of his/her election/nomination/until his/her successor has been duly elected or nominated, whichever is more extended. The members are eligible for re-election or re-nomination.

Organization Structure

It has one President, Vice-President, Secretary, Assistant Secretary, and other staff **(Fig. 4.3)**.

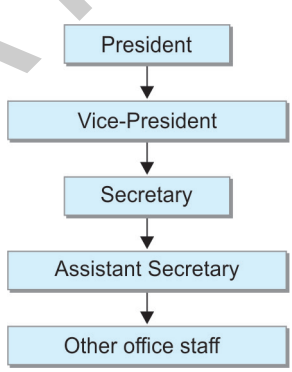

Fig. 4.3: Organizational structure of the Indian Nursing Council.

The Council elects a President for 5 years from the first constitution of the council by the Central Government, who shall hold office during the pleasure of the Central Government. The Vice-President is elected among its members. It constitutes the Executive Committee and other committees for general or special purposes from among its members. The Secretary is responsible for keeping the Indian Nurses Register per the provisions of the Act and, from time-to-time, revising the register and publishing it in the Gazette of India as may be prescribed.

Committees

The Indian Nursing Council constituted the following committees:

- **Executive committee:** The committee consists of nine members, of whom the Council elects seven from among its members. The President and Vice-President are members ex officio of the committee. It deliberates on the issues related to the maintenance of standards of nursing programs. It may appoint inspectors, whether from among members of the council or otherwise, to inspect any institution and attend examinations held to grant any recognized or recognized higher qualification. They report to the executive committee on the suitability of the institution inspected. The committee forwards a copy of such a report to the authority. The institution concerned, to the Central and concerned State Government and State Council/ university.
- **Nursing education committee:** The committee deliberates on nursing education issues and policy matters concerning nursing education.
- **Equivalence committee:** The committee is constituted by the council to check the equivalency of foreign qualifications for recognizing registration under Section 11(2)(a) or (b) of the INC Act, 1947, as amended.
- **Finance committee:** The finance committee is an essential sub-committee of the council, which decides upon matters about the council's finances regarding budget, expenditure, implementation of Central Government orders concerning service conditions, and other related activities.

Functions of the Indian Nursing Council

The Council is responsible for regulating and maintaining a uniform standard of nursing education, including of Nurse and Midwives, Midwives, Auxiliary Nurse-Midwives, and Health Visitors by performing the following functions:

- To set and monitor the standard of nursing education for all categories of nurses.

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- To recognize the qualifications for registration and employment in India and abroad.
- To recognize a foreign degree/diploma/certificate in nursing on a reciprocal basis.
- To approve the registration of Indian and Foreign Nurses possessing foreign qualification.
- To withdraw the institution's recognition if it fails to maintain its standards.
- To develop and revise the code of ethics and professional conduct for nurses.
- To regulate policies and programs of nursing education and nurses.
- To prescribe a minimum standard of education and training for various nursing programs.
- To improve the quality of nursing education.
- To maintain a live register of nurses through the nurses registration and tracking system.
- To advise the State Nursing Registration Councils, Examining Boards, State Governments, and Central Government on various vital issues regarding nursing education in the country.
- To promote research in nursing.

Activities of the Indian Nursing Council

The prime responsibility of INC is to set the norms and standards and make amendments to regulations related to nursing education, training, research, and practice within the relevant legislative framework. Various activities of INC are:

- **Activities related to state nursing councils, schools of nursing, and examination boards:**
  - Prescribing of syllabi
  - Implementation of syllabi
  - Recognition of qualifications
  - Maintenance of a live register of nurses
  - Collection of data from schools of nursing
  - Advise on the matters proposed by the State Nursing Councils and nursing institutions.
- **Activities related to the Government of India:**
  - Sanctioning of budget and grant-in-aid
  - Sanctioning of the scales of pay and allowances of the offices and staff of the council.
  - Collection of information from State Nursing Services and School of Nursing having special projects.
  - Declaration under Section 10, 14, 15 of the INC Act.
- **Activities in support of the World Health Organization and other organizations:**
  - Development of (1) Teaching material for Quality Assurance Model, (2) Nursing Practice Standards, (3) Curriculum for HIV/AIDs and ART, (4) Strategic framework for advanced standard and investment plan for advancing standards of nursing education and practice, (5) Module for the training of nurses in providing outreach services during the disaster, and for facilitators and (6) Module in nursing care in emergency.
- Organizes a training program for trainers for teaching faculty in Integrated Management of Neonatal and Childhood Illnesses (IMNCI).
- Constitution of National Consortium for PhD in Nursing with six study centers.
- **Miscellaneous activities:**
  - Operational management and regulation of services in the interest of society.
  - Keeps up to date with tracking international development.
  - Understanding research in various relevant fields.
  - Responsible for the corporate governance of nurses and the nursing profession by the issue of discipline.
  - Promoting health and healthcare, proposing and commenting on planned legislation, and proactively advising, altering, and offering suggestions to the government on matters affecting the nursing profession.
  - E-Learning
  - Publications
  - Organizing conferences and workshops
  - Maintaining statistics

Indian Nursing Council has developed the 'Nurses Registration and Tracking System' and software designed with the National Informatics Centre (NIC), Government of India, to maintain and operate the Indian Nurses Register. It was implemented under the Indian Nursing Council (Nurses Registration and Tracking System) Regulations, 2019 by suppressing Regulation 59 of the Indian Nursing Council (Conduct of Business) Regulations 2009, which came into force on May 7th, 2019.

State Nursing Councils/State Nurse and Midwives Registration Councils

Introduction

The State Nursing/Nurse and Midwives Registration Council (SNRC) is a nursing regulatory body at the state level. It is autonomous, except it does not have the power to prescribe the syllabi for courses, recognize examining bodies, and regulate reciprocity, which is now vested in the Indian Nursing Council.

State Nursing Registration Act was framed as per laws and regulations delegated by the Indian Nursing Council State Legislation. These laws and regulations are to create uniformity in the standards established by the states for the practice of nursing and to control activities and conducts of all government employees by government service

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Salient Features

- The book covers the subject content prescribed by the Indian Nursing Council for Post Basic BSc Nursing students.
- The content is organized systematically and expressed using pedagogical and teaching-learning principles to help users build skills in learning nursing foundation concepts.
- Using diagrams, tables, and boxes makes content self-explanatory and enhances the pedagogical features.
- Each chapter begins with a "Chapter Outline" and "Learning Outcomes" that provide readers with an overview of fundamental concepts.
- "Chapter Highlights" at the end of each chapter allow students to recap what they have learned and assess their learning.
- Subjective and objective review questions, including multiple-choice questions with answer keys, are utilized for self-assessment.
- Each chapter has carefully selected references as suggested readings to benefit readers interested in exploring the topics in detail.

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She has guided and evaluated dissertations and theses of doctoral, master's, and undergraduate levels for many nursing students at different universities. She has also conducted Viva-Voce examinations for master's and doctoral nursing candidates. Throughout her professional career, she has undertaken departmental research projects and has been a member of various committees, including the Research Development Committee, Advisory Committee, Curriculum Committee, Academic Accreditation Committee, and Board of Studies.

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