



THE IMPACT OF NURSE-LED INITIATIVES IN FOSTERING NURSE-LED INNOVATION AND ENTREPRENEURSHIP

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Abstract

Global health reform is necessary as a result of the mostly elderly population, rising prevalence of chronic illnesses, and mounting expenses. In order to fulfill these requirements, nurses are being urged to use their expertise to the maximum degree and assume important leadership positions in health policy, planning, and provision. This may include entrepreneurial or intrapreneurial positions. Despite being the biggest group of health professionals, nurses often face limitations in their range of responsibilities. Nurses have the ability to enhance health services in a manner that is both efficient and economical. However, in order to do this, it is essential that they be seen as equal collaborators in the delivery of health services. This article offers a worldwide perspective on the changing responsibilities of nursing in promoting innovation in the field of healthcare. This text provides a comprehensive account of the history of entrepreneurship and intrapreneurship. The text also covers the incorporation of a social entrepreneurship strategy in the field of nursing, the many environments for nurse entrepreneurship and intrapreneurship, and the potential consequences for both research and practice.

Keywords: nursing, role of nursing, entrepreneurial, intrapreneurial, social entrepreneurship, Future of Nursing, health reform.

1. Introduction

The global health systems are under increasing pressure as they strive to efficiently, inexpensively, and effectively address the requirements of the population. There is a significant worry over the incorrect distribution of skills across the health workforce, challenges in attracting and keeping workers, and the underutilization of some health professionals, including



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nurses. It is commonly recommended that health care systems adopt needs-based, patient-centred approaches to treatment, which include using teams with a diverse range of healthcare professionals. This is seen as crucial in order to provide seamless, inexpensive, and high-quality care that is available to everyone. The use of evidence-based treatments in health care has shown to result in enhanced health outcomes (McDermott, Tulip, & Schmidt, 2004; Rittenhouse et al., 2010). Interdisciplinary healthcare teams possess the capacity to enhance results, hence decreasing costs and augmenting prompt access to treatment (Willens, Cripps, Wilson, Wolff, & Rothman, 2011). It is crucial to have a well-funded health infrastructure that provides appropriate treatment and is backed by a staff that meets the healthcare demands of the population in order to offer high-quality care.

Nurses make up the majority, reaching up to 80% (Hughes, 2006), of the healthcare workforce and are recognized as the primary staff members across the whole healthcare system in most nations. Despite the crucial and substantial function that nurses fulfill in the healthcare system, they are seldom seen as equal collaborators in multidisciplinary healthcare teams. Consequently, the distinct abilities possessed by generalist and specialized nurses are sometimes not fully used across the whole spectrum of healthcare. The Institute of Medicine (IOM) recently released a report titled "The Future of Nursing: Leading Change, Advancing Health" which highlights the significant role nurses play in creating a healthcare system that meets the need for safe, high-quality, patient-centered, accessible, and affordable care. Nevertheless, in order to achieve these results, it is crucial for nurses to use their whole expertise and skills while revolutionizing the delivery of healthcare by establishing comprehensive collaborations with other healthcare professionals.

Research has acknowledged that there is untapped potential for nurses to engage in more extensive practice when working with physicians and allied health professionals in multidisciplinary teams (Buchan & Dal Poz, 2002). The recognition of this fact has led to a significant expansion of nurses' responsibilities over the past twenty years. This expansion has been achieved through the creation and adoption of advanced and specialized nursing roles, such as nurse practitioners and advanced practice nurses, which are implemented through new practice models. These enlarged duties have been introduced in various care settings along the whole spectrum of care, ranging from community or public health services and primary care, to acute care, and supporting or long-term care.

This article explores the increasing presence of entrepreneurial and intrapreneurial positions in nursing, which are adapting to the demands of healthcare reforms worldwide, across all aspects of healthcare. This text provides a comprehensive account of the history of entrepreneurship and intrapreneurship. We provide social entrepreneurship as a viable and long-lasting approach to nurse-led healthcare. We also provide concise illustrations of environments where nurse entrepreneurship and intrapreneurship might thrive, along with the potential impact on research and practice.

2. Advancements in the field of healthcare

Information technology is often credited with driving advancements in health care that aim to enhance health outcomes, diagnostic and treatment choices, and the overall efficiency and cost-effectiveness of the healthcare system, but human considerations are often overlooked. The Institute of Medicine (2010) study acknowledges the need of nurses pursuing distinct positions that include a broad range of responsibilities and address gaps in healthcare. Expanding the human effect of innovative health care may be achieved via the provision of innovative and creative health care by entrepreneurial and intrapreneurial nurses in various health settings.

3. The nursing entrepreneurship

Nursing entrepreneurship offers nurses the chance to become self-employed, enabling them to follow their own vision and passion for enhancing health outcomes via new methods. A nurse entrepreneur, like other entrepreneurs, is defined as an individual who owns a firm that provides nursing services in various capacities such as direct care, education, research, administration, or consultation (International Council of Nurses, 2004, p.4). Consequently, the nurse works independently and has direct responsibility to the customer, whether it be a person, private entity, or public organization, to whom they provide their services (Liu & D'Aunno, 2011). These nurses have the ability to operate their own clinical practice, establish a business such as a nursing home or pharmaceutical firm, or establish a consultant business in fields like education or research. Nurse entrepreneurs are those who provide incentives that result in change, the modernization of health systems, and the showing of leadership (Raine, 2003).

The use of ingenuity to generate novel concepts, enhance service or delivery techniques, or create innovative goods or applications for current items is an essential attribute of entrepreneurship. Entrepreneurial nurses, with advanced or specialized skills and knowledge, are advanced practice nurses who develop goods or services that may be marketed to other entities.

Unlike an entrepreneur, a nurse intrapreneur is a paid employee, often working for a government-operated health service. Their role involves creating, promoting, and implementing new and innovative health or nursing services inside a healthcare facility, such as a hospital or nurse-led clinic (Hewison & Badger, 2006). Nurses have been creating innovative business ventures within the healthcare industry since the era of Florence Nightingale. However, it is only in recent times, with the growing need for secure, top-notch, and efficient healthcare services, that more resources are being allocated towards enabling nurses to take on a broader range of roles with increased accountability.

Nurse intrapreneurs create novel healthcare practices inside their organizational framework, therefore assuming both the risks and rewards involved with these creative endeavors in collaboration with their employer (Dayhoff & Moore, 2005). Intrapreneurs often focus on developing innovations that aim to revolutionize the workplace atmosphere or culture, enhance procedures, or create novel goods or services (Drucker, 1985). Intrapreneurs are often driven by

the requirements of their patients to recognize deficiencies in service that may be resolved via the diligent efforts of a healthcare team, which may or may not include themselves.

Entre/intrapreneurial nurses, regardless of their status, demonstrate increased proficiency in their profession owing to their extensive knowledge and abilities. Entrepreneurial and intrapreneurial nurses exhibit some common personality traits. These qualities include self-assurance, bravery, honesty, self-control, and the capacity to embrace uncertainty, handle setbacks, and express their objectives (Cooper, 2005; Wilson & Averis, 2002). The nurse intrapreneur within the employment environment may be analyzed using the conceptual model developed by Wilson and Averis (2002). This model highlights the key features of nurse entrepreneurs, such as internal and external factors that impact them, as well as the benefits and problems they face. For both entrepreneurial and intrapreneurial ventures, it is crucial that nurses have the ability to take advantage of opportunities to fill gaps in service provision. They should also have the necessary infrastructure support and be able to clearly articulate their actions, reasons, and future service expectations.

Quantifying the number of nurses engaged in entrepreneurial and intrapreneurial positions worldwide is challenging due to a multitude of reasons. Entrepreneurship and intrapreneurship are characterized differently depending on the profession and country. Therefore, the idea of nurses becoming entrepreneurial may not be readily comprehended or actualized in certain regions or societies. Nurse entrepreneurs may operate as freelancers, making it challenging to accurately document the quantity of nurses who are not part of the public or private healthcare systems, categorized by their specific roles and skill sets. Demographics may be absent in some locations. Furthermore, it is worth noting that some nations may not acknowledge autonomous nurses, who own and manage their own primary healthcare facilities, as legitimate nurses (Manion, 1991).

The International Council of Nurses has compiled data indicating that around 0.5-1% of registered nurses globally are engaged in entrepreneurial endeavors. The actual figures within certain nations may vary, either being lower or greater, according to estimations. The percentage of nurses or midwives who are self-employed or own professionally linked enterprises varies significantly across different countries. In New Zealand, the rate is under 0.1% (Drennan et al., 2007), while in the United States it is 0.18% (Cheater, 2010). On the other hand, in the United Kingdom, the rate is as high as 18%. Nevertheless, it is increasingly prevalent for midwives to work for themselves, with over 50% being self-employed in New Zealand and 64% in the Netherlands. The most recent Australian Institute of Health Workforce Nursing and Midwifery Labour Force Survey (2009) does not include data on self-employed nurses, so the exact figures are unclear. However, it is widely believed that the number of self-employed nurses in Australia is quite small. There is a global need for improved data collecting and information infrastructure to effectively prepare for the health workforce, as highlighted by the Institute of Medicine in 2010.

4. An examination of the history of entrepreneurship and intrapreneurship

In the past, nurses have faced difficulties and obstacles when it comes to starting their own businesses or implementing innovative projects inside existing organizations. Nevertheless, the focus on healthcare reform has bolstered the development of this changing nursing profession, resulting in certain advancements.

5. Worldwide Issues

Ensuring healthcare reform on a worldwide scale continues to be of utmost importance. However, the nurse and midwifery profession, which constitutes the biggest group of health practitioners, is globally experiencing a shortage of workers, inadequate training, and inefficient deployment (World Health Organization, 2010). As a result, nurses are highly capable of becoming the first-line care providers, functioning both independently and as part of interprofessional teams, while also coordinating their efforts. Despite the wide range of services offered by nurses, their comprehensive understanding of health requirements over the whole spectrum, and the acknowledgment that nurses and midwives play a crucial role in health services, they are not often recognized as important participants in the formulation of health policies. Furthermore, they often do not have equal status as partners within health teams.

6. Healthcare reform and its implications for the future of the nursing profession

In 2008, a significant endeavor began with the aim of evaluating and revamping the nursing profession in response to significant changes in the United States healthcare system. The Robert Wood Johnson Foundation (RWJF) and the Institute of Medicine collaborated on a two-year initiative to produce a study that would include suggestions for a proactive strategy for the future of nursing (Institute of Medicine, 2010). The Future of Nursing research recognized that nurses, who are at the forefront of patient care, may have a crucial impact in achieving goals to ensure that healthcare is accessible, acceptable, and cheap. Prior to this happening, it is necessary to address the obstacles that hinder nurses from successfully adapting to fast changing health care environments and an expanding health care system. According to the Institute of Medicine (2010), nurses will have an enhanced ability to take charge of change and promote improvements in healthcare. Obstacles include the nurses' limited capacity to fully exercise their skills, absence of an education system that facilitates smooth advancement to higher levels, and limited chances for complete collaboration with other healthcare professionals. Additional requirements include more research, enhanced data collecting, and improved information infrastructure pertaining to the healthcare workforce demands.

In the past, there has been a tendency to avoid promoting creativity and entrepreneurship in nursing education due to the prevailing ideals of acceptance, standardization, and prescription (Robinson, 2008). Targeted recruiting and educational techniques are necessary to train nurses for entrepreneurial and intrapreneurial positions, enabling them to assume leadership roles, coordinate care, and build interdisciplinary paths. This statement holds true not just inside the

United States, where the FON study originated, but also on a global scale. Engaging in innovation and leadership entails encountering many risks and obstacles. However, in order for nurses to achieve equitable representation in both the workplace and policy-making discussions, it is crucial to foster their confidence in their abilities (Liu & D'Aunno, 2011).

7. Conclusion

The focus of health reform is progressively shifting towards enhancing and broadening primary health systems, while transferring treatment from hospitals to local communities. The increased focus on prevention and health promotion aims to reduce the prevalence of chronic diseases and maintain efficient treatment of these conditions. Additionally, it seeks to tackle health disparities and improve affordable availability of healthcare services. The success of health system changes, such as those in the United States and Australia, relies on a nursing workforce that is adequately trained and encouraged to take on creative practice roles in many contexts, considering the entire potential scope of their practice.

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