Editorial

Innovation in Nursing: Do We Need It?

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Innovation in the dictionary is known to be "a new method, idea, product...". However, in the Nursing profession it has been the practice to follow guidelines, or procedure and the like for decades. Having said that, the practice has been to stick to the rules, although to me innovation is crucial to the continuing success of any profession / organization.

In the history of Nursing, most innovative ideas took a theoretical base, such as theories for Nursing practice, Nursing process, and several administrative forms to facilitate administrative nursing management and monitoring, as well as tools for data collection in research studies.

Clinical innovative ideas, although I am sure are not rare, but they are not recorded and put into practice as other health related sciences innovative ideas in medicine or pharmacy.

In surgery for example we are aware of the presence of several techniques in surgery or in medical diagnosis that are developed by a pioneer, tested and is put into practice for the welfare of patients and/or advancement of treatment. For long this has made me wonder, why do nurses refrain from seeking to develop —innovate — patient care techniques and tools, machines and instruments to help patients as well as nurses who are striving in their daily work to give the optimum patient care with the aim of cure or in preventive circumstance.

Nurses are the closest healthcare worker to the community and the sick in hospital or in the home. Many years ago when I was an assistant lecturer training 2nd year nurses in the surgical wards , which is one of my favorite areas of clinical teaching – the second is the burn unit- at that time if a patient had a colostomy it would be a total disaster both to the patient and the caring nurses . Appliances, colostomy bags were very expensive and not readily available especially in University Hospitals for patients attending free care.

To me this was my nightmare for weeks , every day I had the students care for the patients, or make dressings, I felt so helpless and even more

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useless to provide more to the patient to alleviate his distress than the routine pile of dressing put over the colostomy site which does not help at all in case of loose stools, even worse in diarrhea let alone the odor that embarrassed and distressed the patient tremendously.

Decision made "I must find a way" other than buy the bags since the patient will not be in the hospital for long and there must be an 'Innovative" way to help him that is cheap, affordable and he or relative can do.

One day while I was driving my car, still thinking and contemplating , I had a flat tire . I stopped to have the puncture fixed. Right there the idea came to me I asked the man to give me pieces of the inner wheel he had and I went home , cut the rubber in round pieces , got a plastic jar, cut the top with the secured lid, fixed it to the rubber, made a belt and used plastic bags that are screwed to the bag by the jar top.

This was my first innovative colostomy bag in 1984 that cost me 40 piasters

(less than one Egyptian pound) when the sophisticate company product cost 40 EGP and bags each 10 EGP. This also was my first research paper presented in an International Surgeons conference.

In conclusion, innovate, learn from the surroundings, watch craftsmen and be part of the creators of tools and technology that help healthcare provision.

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