


The Domino Effect

By Pamela Green



Are you a nurse entrepreneur or a teacher of nursing? Do you write books for nurses or articles for publication in nursing magazines? Do you sell merchandise to nurses? Do you think that you are immune to the effects of massive downsizing that is occurring across the United States and Canada in the health care professions? Colleagues, this downsizing will affect all of us, whether we are currently employed as nurses or if we derive our livelihoods peripherally from the nursing profession.

Downsizing of hospitals results not only in a reduction of staff, but in many instances results in the departure of the "higher paid" more experienced staff nurse. This individual is an "ideal candidate"—on a financial basis—to promote institutional cost savings by her/his departure and may be fired, laid off or offered incentives to take an early retirement package. Some of the more experienced nurses may resign voluntarily due to increased pressures created by staff shortages such as higher patient loads, lower or frozen pay, and the responsibility of overseeing procedures performed by unlicensed staff. Downsizing, as a consequence, not only results in reduction of staff, but, unfortunately in a "hand-in-glove" fashion, results

in an erosion of the knowledge base with the loss of the more experienced—apparently cost prohibitive—nurse.

Institutions (hospitals, nursing homes, etc.) will attempt to fill staff positions in a more cost effective fashion by hiring or retaining less experienced (less costly) nurses, using unlicensed ancillary staff in traditional nursing situations and by using agency or contract staff.

The cost benefit factor of these "cost-effective" measures is glaringly apparent. The cost is to the employee and consumer and the benefit is to the employer. There is a real significant loss of knowledge and competence with the loss of experienced staff. Unlicensed personnel trained to do a particular task will not have the "total" or bigger picture that an experienced nurse would and could miss "key data" that could have a compromising impact on individual patients. Agency/contract nurses are disposable nurses which are being used for staffing in increasing numbers by many hospitals. While very cost effective for the employer, due to lack of providing a fringe benefit package and flexible scheduling contingent on house census, the cost to the consumer and employee is great. These disposable nurses are at greater professional risk in institutions because of their mobility. Due to lack of an appropriate orientation, they may not have an awareness of the various protocols that dictate their roles in a particular job setting and lack of patient familiarity (most significant effect is in Intermediate Care Facilities) may result in inadequate/compromising job performance with their license at risk.

As many nonprofit institutions are purchased by for-profit institutions and increasing numbers of families and companies enroll in HMOs the "show me the money" trend will result in omnipresent pressure and incentives that promote downsizing, cost containment and cost cutting in such a way that profits will be increased for the individual employer/corporation and stockholders.

The impact on the employee and consumer has already been briefly elucidated, another example of the increasing sequential changes (domino effect) is that not only will staffing change but benefits for staff will and has changed in many institutions.

Reductions in the variety of training activities/classes for nurses reveals the view of the institution toward continuing education with only the most basic and required training provided. The "onward rolling"

effect is that nurses—with their pay frozen or decreased—will be limited in discretionary income and as a consequence, participate in a more limited fashion in seminars, seeking of accreditation, subscribing to publications and becoming members of associations.

Both experienced and newly graduated nurses are now "Migratory"—leaving their area/state in order to secure employment. Unlike specialized fields, such as, marine biology, where migration to a coastal area

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is expected, the universal need for health care and its associated professions would dictate that the opportunities for employment are both consistent and universal. These opportunities are universal, but are no longer consistent. Doubling of the nurse to patient ratios, elimination of positions, closings of hospitals and the use of unlicensed staff have altered that consistent need for nurses. Downsizing has saturated the job markets forcing this migration. MIGRATION EQUALS SATURATION.

The domino effect initiated by downsizing—fueled by cost containment and cost cutting—and driven by private industry looms as the foundation for our country's health reform—a feat which was not accomplished by our government through legislation.

Nurses must present a united informed defense. The domino effect must be halted,

corrected or modified. The level of consumer awareness must be increased in order to maintain/regain the integrity of the nursing role in hospitals and other health care settings. Silence is consent. The vital role of nurses must be guarded zealously by first nurses uniting collectively, informing the public figures that represent us as citizens of the associated dangers of "show me the money" trend.

Private business (For-profit hospital, HMOs etc.) will have to bend to basic truths about the undesirable effects of certain cost-effective measures and take steps to correct or amend if pressure/awareness is placed appropriately. We can't be complacent!

In unity and separately, nurses must attempt to censor those individuals, corporations, organizations, publications, and businesses that either promote or tolerate the potential substandard care that will occur with the alternation of traditional nurses roles (as defined historically) by economic sanction. Conversely, support entities and individuals who support the maintenance of the integrity of the nurses' role, with its implied quality of care. In essence, support those who support you.

Both collectively and individually nurses must press for legislation to curtail the growing use of unlicensed personnel in the performance of procedures, and to inform the consumer of the qualifications or lack of qualifications of their caregivers.

Nurses must educate the public regarding the adverse effects that the changes in the role of nurses are having, and will have, on their health care. Educate them through the editorial pages or local news publications and in conversation with individuals and groups.

Be diligent. Be active.

The current trends must change. Without public awareness and support, that change will be difficult.

Without intervention, the dominos will continue to fall. The survival of nursing as a profession is at stake.

YOUR VOICE COUNTS, as well as, your silence.

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Synopsis - Downsizing not only results in a reduction of staff but in an erosion of knowledge base with the loss of more experienced nurses. Nurses must present a united informed defense.