

Stearley's Slant on Nursing After the March



by Harold Stearley

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What do you call 35,000 nurses marching down Pennsylvania Avenue in Washington, D.C.? Well, the overwhelming consensus seemed to call it "A Good Start!" And a powerful start, indeed, for this most historic event, despite the lack of enthusiasm and support it received from a few major nursing associations and publications.

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Staff nurses representing almost every state in the nation showed up to meet with their representatives and demonstrate their resolve to deliver safe patient care. The excitement and energy were palpable as nurses from every imaginable practice setting marched shoulder-to-shoulder from Capitol Hill to the White House!

They had taken time out from their busy work schedules, families, and business obligations to send a message to the country that current management practices to reduce the number of registered, professional nurses in hospitals and replace them with unlicensed aides, pose a major threat to patient care and safety.

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Hundreds of nurses who were unable to attend showed their support by holding local demonstrations, or by rallying with colleagues at airports as their colleagues departed for the March. In Chicago, for example, the Illinois Nurses Association sponsored a rally which drew 200 nurses into the streets. "We were really able to increase public awareness of these issues," said

Pamela Towne, a representative of INA.

Self-sacrificing behavior is not new for nurses who, every day, fight the bureaucracy to put themselves on the line for their patients. "Nurses are the last patient advocates in America!" said Joan Swirsky, Editor-in-Chief of *REVOLUTION*, in her speech before the assembled throng of nurses in Washington.

The message delivered to Washington was clear — nurses save lives! The latest wave of medical horror stories appearing in the media will only be the beginning if corporate America has its way and cuts R.N.s out of the healthcare picture.

Simply, the more registered nurses at the bedside, the fewer patient illnesses and deaths. Citing over a dozen current research articles, Patricia A. Prescott, Ph.D., R.N., documented a six-to-ten percent decrease in morbidity and mortality when the R.N.-patient ratio was increased. And hospitals with higher numbers of R.N.s show greater patient compliance rates with treatments and medications and a significant reduction of readmissions from complications.

In a study of patient outcomes, Roma L. Taunton, Ph.D., R.N., discovered hospital units with higher numbers of R.N.s demonstrated significant reductions — approximately 33 percent — of nosocomial urinary tract and blood-borne infections when compared to those in units with less nurses. These infections cause 20,000 deaths annually, contribute to another 60,000 deaths, and run up costs of over two-billion dollars a year. Her study also documented decreased requests for pain medication, decreased patient length of stay and, consequently, decreased costs for

those patients. Who says R.N.s aren't needed at the bedside?

These and numerous other studies demonstrate the importance of nurses' clinical skills, and the Nurses March on Washington demonstrated the resolve of R.N.s to ensure their skills would be available for patients who need them.

What, exactly, do hospital administrators think they can save by eliminating R.N. positions? Money, of course. The consultants of Magellan Management Group in South Bend, Indiana, polled 103 healthcare executives to learn what the impact on hospitals were of cost-reduction initiatives, most of which involved the layoffs of R.N.s. Most said they were able to reduce their costs by an average of ten percent, but the problem is that the administrators are pocketing these savings while sacrificing the quality of care hospitalized patients receive.

Have any of these so-called cost savings been passed on to the consumer? The answer is NO! It appears that hospitals, by their own records, never needed these savings (read profits) to begin with. Hospital administrators are claiming they must cut back R.N.s because they're in a financial crisis. But their own statistics don't support this position! *Forbes* magazine documented a 23 percent increase in hospital profits in 1991, an 18 percent increase in 1992, and a 19 percent increase in 1993. Fiscal 1994 is expected to be a banner year for hospital profits.

As more patients have been forced into managed health care plans by their employers, Health Maintenance Organizations are having trouble managing the windfall. With their memberships up 11 percent, and earnings up 25 percent, their difficulty lies with managing their profits. Alan Bond, Director of Treasury Operations at Health Systems International, Inc. in Pueblo, Colorado, summed up this problem in the *Wall Street Journal*: "Our problem is what to do with the money that comes in, not whether we have enough cash."

Bond's HMO revenue is growing by \$500,000 a day, forcing him to "hunt for new ways to park the money in Treasury bills, certificates of deposit, and other short-term investments," he said. So, when does the profiteering end? How many patients and professional careers must be sacrificed in the name of this corporate greed?

Nurses have been faced with a systematic dismantling of their profession. Not only are they being kicked out of hospitals, and having their technical roles assumed by unlicensed, untrained assistants, but the legal system has abandoned staff nurses as well, leaving them victims of abusive management

The Media: An Integral Factor In American Politics

The Nurses March on Washington, D.C., generated more news coverage than any nursing event in history. Network TV and public broadcasting channels covered the March, as did thousands of newspapers around the country. In addition, over 100 radio broadcasts, including lengthy call-in shows from major American cities, featured the March and the issues it stood for.

Yet, some nurses returned to their homes to discover no articles in their newspapers, or only short pieces provided by the Associated Press. Why have nurses not been more effective in capturing media attention?

Linda Everett of *The Executive Intelligence Review* in Washington, D. C., pointed out that with 97 percent of nurses being female, many journalists, in both the print and electronic media, view nursing issues as being rehashed feminist issues, and thus, by default, do not pursue them.

Edward Chen of the *Los Angeles Times* believes part of the problem was that so many demonstrations occur in Washington each week that the nursing demonstration was relegated to being "just one more."

Spencer Rich of *The Washington Post* added that many people perceived the March as coming from "a group of self-interested nurses only concerned about their jobs. There was no major social issue presented."

No force in this country generates more influence than the media. Clearly, we need to become more skilled and articulate when it comes to presenting healthcare issues, to try harder to convince the media of the importance of this major social issue: nurses save lives and they are being eliminated from healthcare to maximize corporate profits!

If we employ the same commitment we show our patients to winning over the media, we will enlist a major ally in getting our message out to the public, and it is the public that can exert the most influence over healthcare administration and legislation.

practices.

Last year, the Supreme Court upheld a ruling classifying nurses as supervisors, a decision that essentially eliminates all protection nurses had under the Federal Labor Relations Act. The ruling of the court emphasized that nurses must serve the interests of their employers and *not* the interests of their patients — a scary prospect indeed! While in Washington, nurses demanded legislation to restore their labor law protection.

The Dust Settles

With the March, press conferences, and legislative meetings over, staff nurses and the March's organizers emerged as the true nursing leaders of the 1990s.

These heroic figures conveyed strong feelings of hope and the conviction that with unity and purpose they could succeed in bringing the urgent issues of patient safety before the American public. Many professional nurses, having grown despondent over the pressures they face daily, stated that for the first time in many years they were hopeful about the future.

But the nurses were also enraged! Enraged to hear what their colleagues have been enduring, enraged to see how corporations are placing profits above patients, and enraged to see how traditional nursing associations and publications have backed away from the profession to avoid the risk of losing corporate advertising dollars!

Where Do We Go From Here?

The March was the beginning of a tidal wave of public awareness, spurred by the R.N.s of our country. Now, the most pressing question is: how can we continue the momentum?

"Nurses must wage their battles State by State," said Donna Gentile O'Donnell, M.S.N., R.N., the Deputy Commissioner of Health for Policy and Planning in Philadelphia. "They must identify which positions in their political system have an impact on healthcare policy and target these areas for control."

The 12-year veteran of politics stressed that "nurses must learn the political system and get active in it — learn how to organize, form a PAC, get involved in lobbying, and learn how to attract the media spotlight."

Sound advice. Nurses cannot afford to let their moment in Washington fade. All of us must become involved, write to our legislators, take our message to the editorial pages of newspapers, and unite the public behind us. It's the consumers of healthcare who will ultimately demand the improvements required to ensure their safety, but nurses must assume the lead roles as consumer advocates and educators.

The best thing nurses have going for them is public trust. Simply, the public believes us! We are credible! We have no profit motive to taint our true desire to care for others. In the coming months, we must not only exercise all of our skills to ensure positive outcomes for our patients, but to ensure our own professional survival.



"Nurses cannot afford to let their moment in Washington fade."

[HAROLD STEARLEY, R.N., B.S.N., ASB, CCRN, has held various clinical and supervisory positions over his twenty-year career, and has helped develop innovative programs for several hospitals. He is a member of Sigma Theta Tau and was named in *Who's Who in Nursing* and *Who's Who in America*. His freelance writing appears regularly in the local press in Missouri and his articles have been featured in *Nursing Administration Quarterly*, *Nursing Economics*, *Journal of Nursing Jocularity*, and *REVOLUTION - The Journal of Nurse Empowerment*.]

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Stearley's Slant on Nursing. After the Math

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Synopsis - At the March RN's succeeded in telling the American public what the really urgent nursing and patient-care issues are. Following up remains their next challenge .