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Lifestyle

Section 5

# Primary nursing

## Hospitals bring back Florence Nightingale

By Joan Zyda

SOMETIME AFTER World War II, the American registered nurse was forced into being less like Florence Nightingale and more like a factory foreman.

The shortage of nurses resulted in assembly line nursing, which brought with it an assortment of nameless, often uncaring persons who trained for brief periods before being turned loose on patients. They were practical nurses, vocational nurses, technicians, orderlies, nurse's aides, and nursing assistants.

If you've been in a hospital in the last three decades, you have seen this production line in action. Somebody took your temperature, somebody else gave you a bath, somebody else took your blood pressure, somebody else brought in your food tray, somebody else fluffed your pillows, somebody else...

CONDUCTING THIS "orchestra" was, and still is, the chief duty of the registered nurse in most hospitals. Despite years of learning to care for sick people, she ends up in a supervisory job that takes her out of the mainstream of patient care. If she sees patients at all, it's only briefly when she gives them a shot or pill, or if there's a "problem."

The patients are completely perplexed and often get irritable or depressed by this fragmented and impersonal care; it frightens and frustrates the doctors; the morale of nurses sinks to an incredible low, resulting in a high turnover rate and absenteeism; and it has caused a decline in patient care at many hospitals," says Dr. William Schaffrath, director of the National Joint Practice Commission in Chicago.

The commission was set up in 1972 by the American Medical Association and the American Nurses' Association to solve the growing dissatisfaction with hospital nursing care.

The solution, with which the commission has been shaking the pillars of medicine, is to put the registered nurse back at the patient's bedside, where she can use her training. Some hospitals have already done this, including Rush-Presbyterian-St. Luke's Medical Center, University of Chicago Hospitals, Good Samaritan Hospital in Downers Grove, and Evanston Hospital.

"MOST NURSES we talked to are frustrated. They don't want to be supervisors," Schaffrath says. "They prefer hands-on nursing in the Florence Nightingale tradition. They want to walk out to eat, tending to and cheering up their patients."

Schaffrath credits Marie Manthey, 43, a fleshy former Chicagoan and now vice president of patient services at Yale-New Haven Hospital in Connecticut, for blowing the whistle on nursing. She has advocated the "return to the bedside" alternative in articles in several prominent medical journals.

As a registered nurse for 22 years, Manthey has had an inside look at the failings of her profession.

"Registered nurses have become faceless people, and it's the system's fault," she says. "Nursing has become extremely production-oriented with very little concern for human needs. Most nurses are embarrassed about that. They say, almost apologetically, 'Well, I'm just a staff nurse,' which equates to, 'I'm just a housewife.'"

"BUT IF NURSES got their identity back," Manthey says, "they'd be a proud people again. Then they'd be saying, 'Hey, wait a minute, I am a staff nurse. I am an important person.'"

Manthey wants to see nurses regain the romanticism of their profession, lost decades ago when "care through others" became the norm. She wants a return to the day of the "nurse hero," immortalized in movies and books, who remained at her patient's bedside day and night, nursing, strengthening, and spreading sweetness and light.

"Nurses are supposed to be in the thick of things," she says firmly.

Manthey has coined her remedy, "primary nursing," a system whose main goal is just that — to get the nurse to provide total nursing care to a patient during his hospitalization. That means the same nurse does all the work for a patient from admission to discharge.



Illustration of 1860s American Red Cross nurse, Florence Nightingale.

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