

# [Issues and challenges facing nurses nursing essay](https://assignbuster.com/issues-and-challenges-facing-nurses-nursing-essay/)

Mary Seacole gained her reputation after the Crimean War (1853-1856). Florence Nightingale needed 40 nurses to work in a hospital in London. Although Mary Seacole went to London and brought many letters of recommendation from doctors with whom she had worked, she was told her services were not needed. In 1855, Mary Seacole went back to London anyway, funding her own way there. To pay for the long sea journey, she took food and other useful things with her. She established the “ British Hotel” where soldiers were able to buy food and drinks. Mary cared for the soldiers and helped the wounded soldiers on the battlefield. She gained the name “ Mother Seacole”. She was honored with many awards and medals for her dedication to helping soldiers.

## Mary Elizabeth Carnegie

Mary Elizabeth Carnegie Carnegie graduated with a diploma from Lincoln School of Nurses in New York in 1937. Carnegie earned a BA degree from West Virginia State College; a certificate from the University of Toronto; an MA from Syracuse University and a DPA from New York University. Carnegie initiated the BSN program at Hampton University in Virginia. She also started the BSN program while assuming the position of Dean of Florida A&M University School of Nursing in Tallahassee, which became the first National League for Nursing accredited program in the state of Florida. In 1942, the Florida State Nurses Association (FSNA) voted to admit black nurses to membership.

Although they paid dues, black nurses were not allowed to speak or participate in meetings. Carnegie’s contributions as a nurse scholar and leader helped break down racial barriers. She became a full member of FSNA in 1948, and by 1949, was elected to the board of directors. Carnegie was inducted into the FNA Hall of Fame. She served as the editor of Nursing Research and served on the editorial staff of the American Journal of Nursing from 1953 to 1978. Carnegie also authored three books: Disadvantaged Students in RN Programs, Historical Perspectives of Nursing Research, and The Path We Tread: Blacks in Nursing, 1854-1994.

## Rhetaugh Graves Dumas

Rhetaugh Graves Dumas was a pioneer and vibrant leader in nursing. She was a graduate of Dillard University School of Nursing in 1951. She was the first African American woman and the first nurse to be officially selected as deputy director of the National Institute of Mental Health. Rhetaugh received her MSN from Yale and was the first nurse to perform a randomized experimental design to study clinical nursing problems. She was the Vice Provost of Health Affairs at UM and the Lucille Cole Professor of Nursing. In 1997, she was named Dean Emerita and Vice Provost Emerita of the University of Michigan. She was a founding member and former president of the American Academy of Nursing, and wrote an influential research paper, “ The Effect of Nursing Care on Postoperative Vomiting”. She also wrote the oft-cited “ Dilemmas of Black Females in Leadership” in 1980.

## Mary Mahoney

Mary Mahoney was admitted to the New England Hospital for Women and Children nursing program at the age of thirty-three. The program was sixteen months and included lectures and hands-on patient care. Of the forty-two students admitted to the program, only four graduated and Mary Mahoney was one of those four graduates. She received her nursing certification on August 1, 1879, making her the first African-American in history to earn a professional nursing license. Mary was most noted for her hard work to improve the status of African-American nurses and encourage the expansion of intercultural relations. Mary was the co-founder of the National Association of Colored Graduate Nurses in 1908. Mary Mahoney helped open the doors of opportunity for the African-American nurses.

## Beverly Malone

Dr. Beverly Malone PhD, RN, FAAN has been since July 2001, general secretary of the Royal College of Nursing. She is also a board member of HEFCE. While working as dean and professor of the School of Nursing at North Carolina Agricultural and Technical State University at Greensboro, she also served on the Governor’s Task Force on the Nursing Shortage and was a commissioner of the North Carolina Commission on Health Services. Dr. Malone held the positions of president of the American Nurses Association (ANA) (1996-2000) and Deputy Assistant Secretary at the United States Department of Health and Human Services for a one year term. Dr. Malone also served as the representative of the U. S. International Council of Nurses. Dr. Malone has also served on former President HYPERLINK “ http://en. nursingwiki. org/index. php? title= President\_Clinton&action= edit&redlink= 1″Bill Clinton’s Advisory Commission on Consumer Protection and Quality in the Health Care Industry. Dr. Malone was later appointed as a member of the U. S. delegation to the World Health Assembly, by former President Clinton and was a part of the president’s table discussion on the Patients’ Bill of Rights. Dr. Malone also served on the board of directors of the National Patient Safety Partnership, a collaboration with the Department of Veterans Affairs (VA), the American Medical Association and other national health care organizations. She was the second African-American to serve as president of the ANA.

## Interview 1 nurse who was employed in nursing prior to 1980’s

I interviewed Kathleen Venable who graduated from Alcorn State University with an ASN. Kathleen also received a BSN from Loyola University and a Masters of Science from Southeastern Louisiana University. I asked her about a typical day shift, beginning and ending salary and similarities and differences with contemporary nursing prior to the 1980s.

## Typical day/shift

Mrs. Venable worked at Catahoula hospital, a sixty-four bed hospital in Jonesville, LA. The hospital is split into east and west wings. She worked on a thirty-four bed hall. The unit consisted of two RNs (one head nurse), a LPN and 2 Certified Nursing Assistants. The head nurse was in charge of documenting all orders from doctors and any stat orders that needed to be brought other places someone off the unit had to bring it. The other floor RN was responsible for starting all IV’s and administering all IV push medications. If the unit was full the nurses were assigned 15 patients a piece.

## Beginning and ending salary

Mrs. Venable beginning salary was 8. 25 and when she left a year later and went to Our Lady of the Lake she was offered 8. 25 with shift differential. Now the average starting salary in Louisiana is 19. 25-20. 00 an hour with shift differentials.

## Similarities and differences with contemporary nursing

There were many differences with nursing compared to now there was no set limit to nurse to patient ratio, there weren’t any Braden or pain scales. There were no resources to help the patients after being discharged from the hospital such as social workers, home health, Council on Aging or rehabilitation services. Nurses were unable to challenge a doctor’s decision and be the best patient advocate they could be because whatever the doctor said no one could question it for fear of losing their job.

Similarities the nursing process was around and the typical working shift is still the same (12 hour shifts). She stated that there is much advancement in medicine today but the amount of time and energy is still the same in patient care.

## Review 1 prominent nursing journal published in early 1900s

What are the similarities and differences with the same journal in the early 1990s compared to the 2000s

Emphasize nursing roles and responsibilities

The American Journal of nursing is the oldest nursing journal around. In the 1990s the journal wrote about mandating nursing caps, how to keep up with your staff after retirement and Faculty as relief staff to palliative care, and responding to disasters. The focus is still improving patient care but with all the recent tragedies America has had, the journal has shifted to teaching nurses how to care for patient after catastrophes.

## The Present

## Which nurses or nurse educators serve as role models to you? What are some of that person’s characteristics that attract you?

The nurses that serve as my role model are London Lewis (sister-in-law) and Mrs. Lois Bridgewater. London Lewis graduated from William Carey University. She is married with a child, but she didn’t allow that to stop her. She is now in a Certified Registered Nurse Anesthetist program and is scheduled to graduate in May 2011. London was a full time wife and mother all while receiving a BSN and working on her current degree. London graduated from William Carey and her professors continue to speak highly of her motivation and dedication to becoming a nurse. Mrs. Lois Bridgewater is also one of my role models. She was my clinical instructor in nursing 310. What amazes me about her is the drive she has to accomplish everything she set out to do. She is an expert in her field and while at North Oaks Hospital, the staff respected her decisions and work ethics. Mrs. Bridgewater is not only a nurse but also a Certified Midwife, and she’s working on her Family Nurse Practitioner.

## Respond to the following questions:

What types of software skills are critical for new nurses entering the workforce?

The type of software skills needed for new nurses entering the workforce are Microsoft Office which includes Word, Excel, PowerPoint, Access and Outlook.

Why is it important for new nurses to be able to search the Internet for information?

It is important for new nurses to be able to search the Internet for information, in the event they have a question about something and there aren’t any resources available to you at that moment. The nurse can always get on the computer and find the information needed at that moment.

## The Future

What are some of the challenges you see facing the nursing profession in the

The challenges I see facing the nursing profession is patient healthcare due to nursing shortage. With the shortage of nurses, there is an increase in the patient to nurse ratio. With more patients, a nurse has less time to spend with each patient, which causes a decrease in the quality of care to all patients.