

Nurse-Technology vs. Nurse-Patient Relationship: Implications for Education, Practice and Nursing's Future

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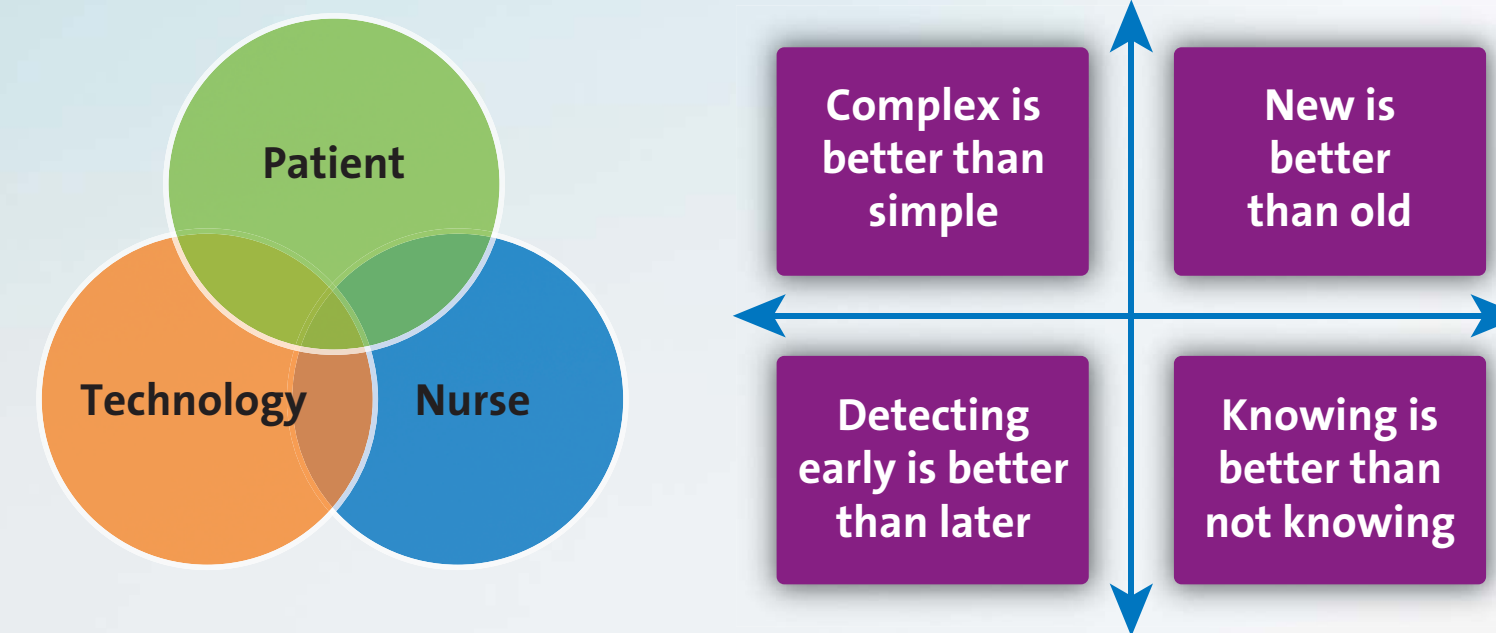
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Objectives

1. Describe the history of technology application in nursing.
2. Describe methods for future technology integration into practice.

Underlying Myths Regarding Technology Expansion 9

Technology reduces risk of missing a problem, decision regret, uncertainty & litigation



Unspoken Truths of Technology Application 14

- Patients have been technologically rendered as “data”.
- Clinicians are increasingly physically disconnected from patients.
- Technology design, use, & applications -while achieving regulatory mandates, often fail integration into the environment of care which results in errors, workarounds, & more alarms.
- The promises of technology (*less work, more time*) are more often *fantasy*.
- More often, technology expansion results in nursing responsible for *more* tasks & *more* patients.

Nursing's Responses to Technology Expansion in Health Care 1, 2, 4, 7, 10, 16

- Nursing is unaware of the depth of impact of technology on nursing values, practice & environment of care.
- Nursing has afforded **no resistance** to assuming the responsibility for technology application in health care.
- Technology application **requires intense education, competency assessment, & time-consuming repetitive tasks.**
- Increasing emphasis on objectivity, mechanization, efficiency which can **NEVER** substitute for caring.
- Intense human needs **forgotten** or **ignored** in technological rich environments.

The Nurse-Patient Relationship is Eroding 4, 6, 11, 19, 20, 21

- Intimate body care & sacred therapeutic relationships are increasingly being replaced with **technical intimacy**.
- **Overemphasis** on technological competency has gradually eroded the nurse-patient dyad to the patient-technology-nurse triad.
- Increasingly, the patient-nurse relationship occurs only if there is **time left**.
- Gradually, the nurse-patient relationship, which has the greatest lasting impact on the health care experience, is **disappearing**.

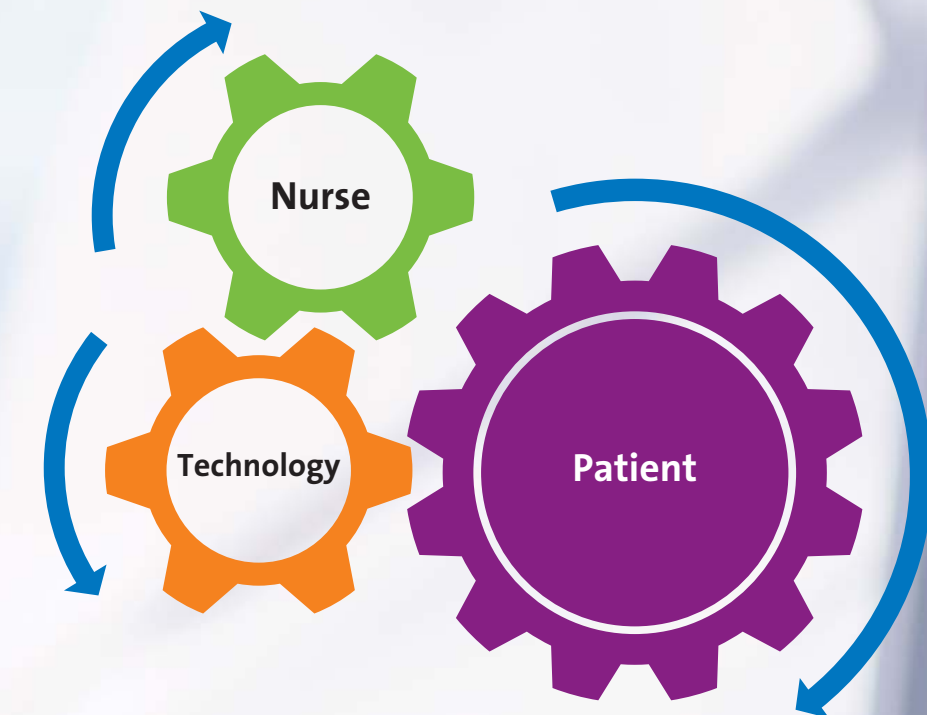
Boundaries & Outcome of Health Care Technology 3, 4, 8, 12, 13, 17, 19,20

- The increasing **mechanistic view** that human beings are predictable & manageable.
- Increasing emphasis on technology is changing nursing's paradigm from holism to a **biomedical model**.
- The **promise** that the technology permits the nurse to care for *more patients is fantasy*.
- Technology **increases** the need for *more nurses* related to maintenance, programming, troubleshooting, & alarms.
- Technology usually **restricts** patient mobility, which increases pressure ulcers, respiratory problems, & falls.
- The most **dangerous belief** is that technology can *substitute* for the judgment of a nurse.
- Nurses make technology **SAFE!**
- Nursing **lacks a leader, a focus and a champion** for technology integration into nursing's paradigm.
- Greatest **risk** is the unchecked erosion of all that is compassionate & humane in the nurse-patient relationship.

Recommendations for the Future 4, 5,6,15,18,19,20

- Nursing must **advocate** direct human connections which require time, energy, effort & interaction.
- Nursing has an **obligation** to **protect** the nurse-patient relationship during technology expansion.
- Nursing education must **focus** on non-technological aspects of nursing care; **nursing assessment, communication, listening & therapeutic presence.**
- **Educate** nurses to recognize when technology is used as an excuse to avoid caring.
- **Critical evaluation** of technology before & after implementation.
- **Preserve** nursing-patient relationship.
- **Protect** vulnerable patients.
- **Drive** safe technology application.

Patient outcomes are a function of nursing's relationship with technology AND the patient 10,22



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