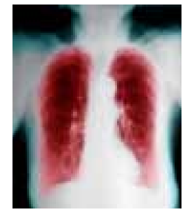
Nursing Practice

HIGHLIGHTS

Avoiding air embolism during CVC removal *p23*

Developing an end-of-life benchmark *p15*

How to interpret spirometry results *p18*



COMMENT

"Nurses should defy the deeply embedded doctor-nurse game"

The "doctor-nurse game", as described by Stein in 1967, was an oppressive tradition built on a long-standing historical relationship. Stein concluded that both professions would do well to eradicate this "transactional neurosis".

The game he described was that nurses should be bold, have initiative and make recommendations to influence their patients' care. At the same time, they must appear passive and make their recommendations appear to have been thought of by doctors.

Such communication strategies came from underlying social assumptions, in this case that doctors were masters, and nurses servants. This communication game was just one example of the unjust inequality of professional hierarchy that assumed doctors were superior to nurses. This assumption came from several sources, mainly class and gender oppression.

You would think that these unfair games have been consigned to the dustbin of history. Nurses have been educated in universities since the mid-1990s. We now have nurse prescribers, nurse consultants and nurses with PhDs. Surely, this makes nurses part of the professional class?

Feminist theory and women's liberation activism have removed the legal impediments to women (and men) joining whichever profession they can gain the qualifications for. Women now make up more than half of all medical students. Isn't this evidence that the image of the female nurse being ordered about by the male doctor is a thing of the past?

Unfortunately, it would appear this professional imbalance continues. Doctors with equivalent experience and academic qualifications continue to demand much higher salaries than their nurse colleagues at all levels. Male doctors continue to hold the more prestigious and powerful jobs.

Examples of this unequal relationship continue at all levels. Indirect patient care tasks such as venepuncture, cannulation and prescribing are being handed over to nurses because they are too mundane for doctors. Major decisions in patient care tend to remain the responsibility of doctors. Resources for nurses to engage in professional education and research are far more limited than for physicians. Many interview panels for senior-level nurses at both universities and NHS institutions are chaired by doctors, while nurses rarely sit on medical interview panels.

If nursing aspires to be an equal but different profession to medicine, we must start challenging these deeply entrenched inequalities. It will not do for nurses to pretend this imbalance has gone away.

If we cannot fully use our education and experience to influence important parts of patients' care, we are doing them a disservice.

The existing culture unjustly subordinates nursing to medicine. But culture is entirely constructed by humans so, with effort, it can be changed. Since the 1960s, there has been progress, and degree-level registration will help to raise the status of the profession. Nurses must continue to push for equality for their sake and for that of their patients. **NT**

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SPOTLIGHT

Fears over single rooms can be allayed

Moves to increase the number of single rooms in NHS hospitals cause anxiety for many nurses (see Letters, page 8). They argue, for example, that more nursing staff are needed and that patients may feel isolated.

Our innovation (page 21) illustrates how, using Productive Ward principles, nurses' fears can be allayed if ward staff and patient representatives are involved in designing new wards.

The work gave patients the privacy and dignity of en-suite facilities. And while single rooms allow patients to be isolated for infection prevention and control, large windows onto the ward prevent them from feeling isolated and ensure nurses can observe them at all times.

Of course, this initiative involved designing new wards, but it does show that single rooms aren't necessarily a cause for concern.

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