WILL COMPUTER TECHNOLOGY LEAD TO MORE AND BETTER NURSING?
MAY NURSES DIRECT THIS DEVELOPMENT?

Professionals may influence and direct the development of their own profession on condition that they know the technology that is introduced. The "Florence-project" at Institute of Informatics, University of Oslo, started July 1, 1984. The aim of the project is to develop and disseminate knowledge about how computer technology may be used as a tool in "proper nursing".

The project is also aiming at giving computer scientists some information on how they may develop tools in cooperation with the professional groups using the technology, so that technology may be adjusted locally by the professionals. The project is organized and financed through the Scandinavian research program SYDPOL (SYstem Development environment and Profession Oriented Languages). The project group at Institute of Informatics consists of 4 computer scientists, 1 social anthropologist, and 1 nurse. Professor Kristen Nygaard is responsible for the project.

Today many nurses are in contact with edp at work, but this is often a technique having been introduced without their participation.

THE WAY EDP IS USED IS IMPORTANT.

The users' experiences (positive and negative) depend on the way edp has been introduced as well as on the technique itself. Edp (or any other technique) that has been "forced upon" nurses has often - created opposition and - created bad systems.

The opposition has often resulted in not very successful pilot projects, where it is difficult to draw any conclusions of the value of the edp-technique itself. The lack of user participation has often resulted in systems not fit for the users in their daily work. On the other hand, nurses whose main concern is "proper nursing" should participate in the development of systems to be used in nursing. There is an evident risk that nurses whose main concern is edp (or who are more concerned with technology than with nursing), are those who develop systems for nursing.

WHAT IS "PROPER" NURSING?

When I have emphasized the importance of nurses being concerned with "proper" nursing engaging in the way edp should be used in their profession, I owe to say something about what I consider to be proper nursing.
"The collaboration" between the one who receives and the one who gives care is probably the most important factor in nursing. I maintain, that "proper nursing" occurs when the collaboration is in such a way:

1) that it stimulates good health,
2) that people being cut off from normal life because of chronic diseases, handicaps etc. experience life as good and meaningful,
3) that people being in acute or life threatening situations may experience confidence and calmness,
4) that dying people experience peace.

All persons providing such care "provide nursing" even if they are not trained nurses.

However, nurses have

a) a responsibility for practising such care, and they have
b) a responsibility for developing and spreading knowledge of which factors in this collaboration provide such results.

Proper nursing necessarily implies a consideration of the quantitative factors. It is the nurses' responsibility that all who need nursing are given care.

If proper nursing is provided to only a few, while the queue of those who need it increases, quality should be considered on the basis of the entirety. The application of edp should be considered on the basis of this.

WHO SHOULD DIRECT THE DEVELOPMENT WHEN COMPUTER TECHNOLOGY IS APPLIED IN NURSES' WORK SITUATION?

When edp-systems are introduced in nursing, certain work processes and aspects of these are emphasized. It is important to notice the risk that these aspects will awake so much interest and attention, that the most important qualities of nursing, those not suited for technology, are underestimated. Concerning employees in libraries, this dilemma is discussed in the LOFIB-report (Learning Oriented Tests in Libraries), no. 19/83, Work Research Institutes, Oslo: It feels natural to draw parallels to nurses' work conditions. The way computer technology will be applied will vary according to nurses' attitudes of their job/profession, and the already existing work processes. I therefore find it urgent to stress the importance of engagement, i.e. that nurses being concerned with providing proper patient service, caring and nursing, and who estimate the possibilities and constraints of technology in relation to this, are engaged in directing this development.

DEFENSIVE OR OFFENSIVE WAYS OF RELATING TO TECHNOLOGY

The report "Sjukvårdsarbet och datorn" (Hospital Work and Edp) (ADIS RAPPORT 1983-10-05) discusses the problems met by health service when adjusting to computer technology instead of adjusting the technology to health service. "It is e.g. talked about computerizing health service instead of developing tools for health service by means of computer technology." (Author's translation.)

One of the reasons is, that technology is met defensively. One relates to more or less fixed information systems (as already mentioned), transferred from other occupations. Computer technology is introduced because "it has come to stay" and one may experience, that after all, there is no need for it in the work situation.