

# Let Computers Help You, Not Break You?

Invited Editorial by:

Margaret B Gray, DNP, MSN, RN

*Citation:*

Gray, M. (February, 2009). Invited Editorial: Let computers help you, not break you. *Online Journal of Nursing Informatics (OJNI)*, 13, (1). Available at [http://ojni.org/13\\_1/Gray.htm](http://ojni.org/13_1/Gray.htm)

Computerizing nursing documentation, a goal for nearly all hospitals in the country, is a great goal, a lofty goal, a necessary goal. Computers are essential in the 21<sup>st</sup> century and if used wisely and for what they are intended, they are a hospital's and nurses' best friend. But, be careful what you ask for, they can also take a great nurse and break them.

Computers and computerizing patient care can do wonderful things. Computers can help nurses set up a plan of care in minutes; they can ask all the right questions on an admission and require that they be answered! They can remind nurses what care needs to be done, when to do it and to document that care. Computers integrate orders into documentation as well as intradepartmental documentation and the flow of information. They make what we do easy to read, comprehensive, and easy to track for quality assurance. What computers can't do, what we can't allow them to do, is break our patient care givers. Computers cannot replace a nurse, they cannot replace their intuition, and they cannot replace their intelligence and certainly not their care. Nurses cannot become robots, doing only what the computer pops up for them to do. Nursing has come too far, been educated to be independent,



critical thinkers and we cannot allow ourselves to be broken by a software program, no matter how robust.

Having a computer help you choose a plan of care, suggest interventions, set up a neat, tidy plan in minutes does not negate the fact that it is still a Nursing plan of care. The key word is Nursing. In assessing a patient, an RN will most likely have, within only minutes, used their innate computer, their brain, and already assessed and laid out in their mind a list of what needs to be done for their patient. Then, from that point to the point of inputting that information into the computer, that knowledge, that common sense and intuition we as nurses have so acutely developed, cannot be put aside simply because of a computer system. No computer system, no matter how robust, can replace a good nurse. Computers can make suggestions, integrate information, and even flow past information forward to reduce the amount of entry of information that is needed but it cannot be the nurse. We as nurses cannot allow ourselves to become so dependent on a computer that we lose sight of what is most important, quality patient care. If a system does not pop a screen up to remind a nurse to do a neuro check on a fresh stroke patient does that relieve her duty to do so? If the computer system pulls in the last set of vital signs or a weight for a patient so the nurse only has to input what has changed, does that give her permission to not bother checking the weight or vital signs and allow the information to flow forward unchanged? No, of course not, and we all know that it does not. So why is it that we allow ourselves and our licenses to be compromised and worse yet, allow our patients to be compromised? Yes, numbers and acuity are rising but it is no excuse to not fully assess our patients and document accurately. Fight the fight of understaffing if needed but don't cut yourself or your patients short just because of a computer. Our license is on the line as are our patient's lives. The installation and the implementation of a computer system is not a reason to allow ourselves and our integrity as nurses to be broken.

Clinical Information Systems RN's (IT nurses) invest their time into setting up a computer system to make sure that documentation and orders are as robust and helpful as possible. Patient care nurses are the ones at the bedside. The IT nurse cannot see the patient, hear the patient, or feel the patient. They cannot individualize the plan of care for the patient or add the psychosocial interventions the RN at the bedside senses the patient and/or their family

needs. The bedside nurse has always been, still is, and will always be the patient's hero: the one who cares for them, advocates for them and makes sure their needs are met to the best of their ability. Nurses in direct patient care must allow a computer system to facilitate their work, not dictate care or provide excuses. Nurses must never lose sight of the fact that the patient is in our hands and we are, and must remain, in control. We are nurses!

### **Author Bio**

Margaret B Gray, DNP, MSN, RN

Margaret (Peggy) Gray, DNP, MSN, RN is currently the clinical information systems coordinator at Greenwich Hospital in Greenwich, CT. She has been a nurse for 27 years and worked in information systems for the last 15 years. Prior to working in IS she has worked in education, med/surg, public health, and critical care.