Retirement? What Retirement?
RN life after work ends (or not)
costs, or at all? Very, very few, certainly not those in 94 percent of U.S. metropolitan areas that are served by one or two insurance companies, as shown in the AMA's 2008 study of insurance markets. Insurance coverage and companies now control patient choice of provider and treatment — often with terrible health results.

One of the great advantages of single-payer is that it guarantees patients the ongoing choice of a doctor or other provider, who are paid for providing treatment on the same basis.

Third, ensure affordable care for all. Here again, single-payer has the advantage from a clinical point of view. Taiwan is the most recent country to have adopted single-payer, in 1995. The percentage of people with health insurance climbed from 57 to 97 percent, yet the expanded coverage produced little if any increase in overall healthcare spending beyond normal growth due to rising population and income. Taiwan had a system much like ours: multi-payer, dysfunctional, and broken. They made the switch just a decade ago, though some people said it could not be done, with great success for their people.

The U.S. ranks last among 19 leading industrialized nations in preventable deaths. If the U.S. matched the top three—France, Japan and Australia—in timely and effective care, 101,000 fewer Americans would die every year.

In a study released earlier this year by CNA/NNOC, we show that extending Medicare to all would not only provide desperately needed medical care to millions but would also result in the creation of 2.6 million new jobs in this nation.

The evidence is clear: single-payer works, it best meets the president's principles, and most important, it best meets the needs of my patients, for whom I have a professional responsibility to advocate.

Our history proves that with political leadership any reform that benefits the American people as a whole is politically viable. Dare we waste this moment with a reform that will not adequately control costs, be truly universal, improve quality, and guarantee choice of doctor and provider? Or will we leave the American people feeling the moment has been wasted and that once again they cannot trust our government to genuinely act in their interests?

Let's enact single-payer. Let's put patients first.

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Inaccurate and often harmful portrayal of nurses in Hollywood and the media. Summers examines these stereotypes in a new book she coauthored, Saving Lives: Why the Media's Portrayal of Nurses Puts Us All at Risk, which was released this spring. She took time out to share her thoughts with us about how these new television shows will likely influence the public's perception of nursing.

**What are the main problems with Hollywood and other media depictions of registered nurses?**

Harmful stereotypes continue to undermine nursing’s media image. In the vast majority of recent television depictions, nurses are unskilled handmaiden, while physicians deliver all the nursing care that matters.

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**THIS JUNE, TWO NEW HIGH-PROFILE SHOWS FEATURETING REGISTERED NURSES AS LEAD CHARACTERS, NURSE JACKIE AND HAWTHORNEN, DEBUTED ON CABLE TV.** Finally, RNs are getting the attention they deserve. CNA/NNOC seized this pop culture moment to start a public conversation about the realities of nursing in America, and question whether the depictions in the shows accurately reflected the hard work and challenges real nurses face every day: short staffing, mandatory overtime, lack of equipment, overbearing management. We encouraged RNs to watch the shows together and share their opinions on our new blog, RNVoices.net, and released a new television ad titled "Imagine a World Without Nurses" which ran during the premier of HawthornEN that asks viewers to consider the critical role of RNs in ensuring patient safety, and what happens when there aren't enough of them at the bedside.

The shows have already generated some controversy, but whether you are a fan or critic, they put nurses front and center. Sandy Summers, executive director of an organization called The Truth About Nursing, has since 2001 monitored and challenged the defibrillation, triage, 24/7 surveillance, psychosocial counseling, IV medication delivery, and running high-tech ICU machinery. Most shows also portray physicians supervising nurses, leading people to think that nurses exist to serve physicians, rather than practicing at the center of patient care as autonomous professionals. The other prevalent Hollywood stereotype is of the nurse as unskilled worker. Most TV nurses just fetch equipment, answer phones, and push gurneys. Unfortunately, the news media also reports overwhelmingly on physician practice and research while mostly ignoring nursing. Occasionally TV shows rely on the battle-axe, or her sister, the bitter loser, who frustrates heroic physicians and harms patients by imposing senseless bureaucratic rules. Hollywood hardly ever uses the angel stereotype anymore, but unfortunately, that
Do the new television shows Nurse Jackie and HawthoRNes reinforce, combat, or create even more nursing stereotypes?

Nurse Jackie is a compelling show that combats some of the most powerful stereotypes: the unskilled worker, the homemaker, and the angel. Jackie displays clinical expertise, fights to protect her patients, provides skilled psychosocial care to patients and families, and teaches more junior nurses and physicians. She is tough, smart, and witty. Jackie has flaws, but none of them reflect nursing stereotypes, which are widespread social views that take years to develop. It is unlikely that many viewers will link her flaws with nursing. Jackie is addicted to painkillers she takes to relieve pain from a bad back, and in the pilot she does several things that are unethical or even illegal. Some nurses worry that these elements threaten the public’s view of them as ethical and trustworthy. But that image is unlikely to suffer because of one TV show, especially since many viewers are likely to agree with Jackie’s rule-breaking because she (like other TV mavericks) is actually trying to create some good in deeply flawed systems.

HawthoRNes combats stereotypes by focusing on a strong, expert chief nursing officer and some of the nurses on her staff. It has the potential to show the public that nurses are autonomous professionals, rather than low-skilled helpers who report to physicians. The pilot highlights the abuse nurses sometimes face from physicians, and Christina Hawthorne is a black woman, which promotes needed diversity in the profession. Unfortunately, direct-care nurses were mostly presented as weak and frivolous and the pilot included two powerful negative stereotypes. The first is the physician wannabe, in this case a bitter, insecure male nurse who cannot get into medical school. The second is the naughty nurse; here an attractive nurse named Candy who thinks it’s her job to provide sexual favors to wounded veterans in her care.

What should nurses watch for or pay attention to when they view these shows?

Nurses should consider whether the nurse characters are skilled, autonomous professionals who save lives and work at the center of patient care. Conversely, the shows should avoid reinforcing damaging misconceptions. It would also be valuable for the public to see the problems nurses face, such as short-staffing and working mandatory overtime, as well as the effects of nursing errors. Anything that shows how important and complex nursing is also shows the public why nurses need far more clinical and educational resources. We don’t need nurse characters to be perfect, which would not be realistic or compelling.

Geriatric Care RNs in Pennsylvania Unionize

On June 3, registered nurses and other healthcare professionals at Fair Acres Geriatric Center in Lima, Penn. voted 125 to 70 in favor of joining the Pennsylvania Association of Staff Nurses and Allied Professionals (PASNAP/NNOC), an affiliate of CNA/NNOC. There will be 230 employees covered by the newly formed union.

“This is a great victory for nurses and the residents of Fair Acres,” said Carol Dougherty, RN. “We care deeply about our residents. We know what our patients need and it is our responsibility to advocate for them. By having a union, we can address patient care concerns like staffing. And, we can work on issues of respect so that nurses can deliver the best possible care.”

Many nurses have worked for decades at the facility and report worsening patient care conditions at the facility. From poor staffing levels to deskilling of nurses’ work, the nurses hope to create working conditions that will give them ample time to care for their residents properly.

“At a time when the nursing shortage is getting worse because of worsening working conditions, more and more nurses are organizing themselves to win a voice on the job. This organizing victory by the dedicated nursing staff at Fair Acres represents a trend that is only going to grow stronger over the next couple years. Nurses are being required to work harder—physically, intellectually and emotionally—at a time when many nurses are leaving the profession while the aging population places more demands on the system. Forming a union is a natural response to this ‘perfect storm,’” said Bill Cruice, executive director of PASNAP.

Next steps for the newly formed union at Fair Acres will be an election of a broad-based negotiating committee and the beginning of contract negotiations. —Kathleen Casey