

## **Nursing Response**

**The Deputy Director Nursing** and two Assistant Directors having fine tuned all the planning details, including getting the 1<sup>st</sup> extension of the Protected Area permit, before the very warm introduction with the Nursing Superintendent, Deputy Principal and some senior Nurses. The thoughtful thumb nail sketch of the different facets of Nursing Service and the SON, in STNM hospital as well as in the other districts, united us in the bond of understanding

**It was noticeable and commendable** that the Deputy Director and other Nurse administrators organized their workload to attend more than one session. This enhanced our understanding and reinforced the value of what was being shared.

**The initial focus in each session on ‘Let Each Day be your Masterpiece’** identified at least 95% of Nurses had never wanted to be a Nurse.

This phenomena is now a major National problem and its continuing deprecating effect in each Nurse’s life, her marriage and family and in Nursing in each State is marked. This I believe is the number one factor that precipitates ‘justifiable criticism of Nursing.

**In STNH** by far the majority of Nurses, GNM and ANM expressed appreciation through their spontaneous interaction and contribution, as well as their non-verbal expressions which very often spoke louder those words.

Although the Nursing Superintendent had the justification and authority to give a directive, she chose not to exert compulsion but invited all Nurses to attend one or more sessions, and scheduled a set number of Nurses to be freed from their duty for each session thus ensuring no Nurse missed out and patient care was interrupted but not disrupted.

**A few Nurses chose not to attend** but sadly also chose to take the time off, thus denigrating their own profession by allowing the evil spirits of deception and lies to govern their actions, which included stealing time and unearned salary, as well as limiting the quality of their own input into Nursing Services. They chose to identify with a fallen world.

**A negative reaction by a few Nurses** may be expected in any program. Courtesy would have enabled each to voice her objection or concerns either in the session or personally later with the Resource Nurse or Nursing Superintendent. That these Nurses chose to complain to the Secretary of Health and Family Welfare, was a sad indication of their own professional immaturity and insecurity as Nurses.

**Genuine commitment in Nursing** provides the spring board for increasing insight and wisdom for each new situation.

The Nurses who by-passed their own Nursing Administrators to complain, unintentionally brought great shame to their own faces and to Nursing. Through their immaturity and lack of vision, they fuelled the principalities and powers of an already fallen Health Administration that has been the cause of great injustice and hardship to Nurses in Sikkim.

**Nurses can be their own worst enemies when fear generated by the devil and his angels operates in them to destroy the seeds of good.**

**Meeting the Joint Director** who is also the principal of the School of Nursing, was delayed due first to her indisposition, and then to the business of the SON with the practical examinations, followed by the selection of new students.

In two brief interactions it was not possible to schedule specific sessions for the Tutors, and regrettably the Deputy Principal did not appear to have decision making freedom, thus the tutors missed out.

Because the majority of Nurses interacted with in Gangtok and the Districts had never addressed and therefore never resolved, their aversion to Nursing it is imperative that all Nurse Administrators and Educators give urgent attention to their own suffering in this respect in order to better help the students

## Comments

One may question whether a Joint Director ought to hold the chair of Principal when there is so much need for strategic development in hospital and community Nursing Services and in Nursing Education.

The Joint Director's post appeared to be a position of 'political convenience' rather than one of Nursing Authority

- ❖ The cabin door of the Joint Director's cabin was closed.
- ❖ Though not discussed, it is hard to imagine any Nurse receiving the salary of both the Joint Director and Principal.
- ❖ When the most senior Nursing position in a State is not *seen to be functional* Nursing is automatically denigrated.
- ❖ Financial accountability needs to be transparent, in this instance how is the money designated for the 2<sup>nd</sup> post used?
- ❖ Responsibility in selection is essential. The whisper that the incumbent did not wish to be Joint Director is another serious issue.
- ❖ The negative effects of a person whose 'heart is not in the position' greatly increases stress, in this instance a degenerating painful health problem.
- ❖ The Deputy of necessity is in an invidious situation without the delegated power of authority or financial remuneration equated to responsibility.
- ❖ Neither Nurse should be subjected to such an invidious position.
- ❖ The regeneration of Nursing Services and Education is dependent on an alert active Nurse Administrator whose vision is transferred into reality through a great deal of seemingly thankless hard work
- ❖ By the very nature of her position, the Joint Director and her Deputies operate in a 'tension filled' environment that requires a willing commitment with great skill in administration and creative thinking that enables quiet, confident dynamic interaction with other Government officials.
- ❖ Nurses who have a wealth to offer Nursing but shy away from the top most post may be designated as 'Resource Person' which is an important and valued position that lends itself to a joint position such as Principal.

## The Military Hospital (See also appendix 111)

The usual very warm welcome by the Principal Matron and Nursing Officers resulted in two sessions. At the conclusion the expressed desire for much more was reinforced with 'this is the very first time we have felt a bit encouraged since our uniforms were changed.'

### Comment

The message is clear. The increasing exit of Nursing Officers to 'early retirement' shows that the uniform is a tangible that belies the hidden depths of unrest and anguish experienced by Nurses.

That the Military Nursing Services needs a fresh injection of inspired Nursing input. is not peculiar to this one institution. It is a national and international requirement for all Nurses, Military and civil.

How many are equipped to help the lesser equipped understand the truth of growing in faith in the midst of trials? Clerics can do so much but well equipped Nurses can do much more for each other.

"I sometimes felt that I was too young or too inexperienced to bear the responsibility. Yet I soon realized that most of those injured were younger than I.

In conversation, they often asked, "Why are you here?" It was easy to tell them the truth: If you were my brother, father, husband or son, I would want to know that qualified, compassionate and skilled Nurses were here caring for you to the very best of their ability.

This answer satisfied them and gave me purpose as we cared for more and more of their colleagues.

MARILYN MCMAHON (1988), in: *Visions of War, Dreams of Peace*, 1991, pp.84-87]

## Grass at a distance looks fresh and green

Lured by the expectation of a better deal, many Military Nurses are now in the most unenviable positions e.g., the Nurse Supervisor at the 500 bed Manipal Central Research Hospital, No comparable status (she should be the CNO) no Nursing authority; a huge drop in salary plus long hours watching the decline in Nursing because her hands are tied by an autocratic depraved Medical administration.

*What a tragic way for a well qualified Military Nurse to end the last years of her career.*

### Knowledge With Out Wise Action Denegrates

- Nurses working in constantly stressful situations need regular injections of wisdom and understanding to take fresh heart.
- They need to experience practical caring that brings dignity with vision and purpose into life.
- The best antidote for and vaccine against the multiple corrosive forces designed to destroy the Military Nursing Services ought to come from Nurses who are secure in a genuine sense of peace, purpose, *personal wort, and Professional competence.*
- This is gained by Nurses who have received, pondered deeply and practiced using the wisdom and power of reconciliation
- Nurses who having experienced the reality of the Resurrection power of Jesus Christ when withstanding and overcoming negative forces.

## The Manipur Central Research Hospital

### The Paradox of MCRH

We have more degrees, but less sense;  
More knowledge but less judgment  
More experts but more problems  
More medicines but less healthiness....

We have come along way on quantity;  
But short on quality.  
Tall men but short character.  
Steep profitsbut shallow relationships

It is time when there is much in the window  
But nothing in the room.

Adapted from 'The Paradox of our Age'  
by H.H. The 14<sup>th</sup> Dalai Lama

The well cared for grounds of the MCR Institution were a joy to behold.

In response to my request for directions to the Nursing Superintendent's office a student of another discipline willingly guided me up the basement stairs to the College of Nursing.

This was the first clue, Nursing Service had no credence in this high profile institution.

**All decisions** came through the CON for this 500 bed research, referral hospital servicing all the 7 North East States.

How can a Principal Tutor divorced from the reality of Nursing Service administration make right judgements?

A warm welcome by the Nurse consultant ( A Hindu Nurse) who introduced me to those present as the author of the Modules which she had purchased some years earlier, had used and appreciated the relevance of the Bible passages to the different Nursing situations.

Admitting my first intention had been to meet the Chief Nurse for the hospital and then come to the College I was informed that there was no post of CNO, Nursing Superintendent, Matron or even Assistant but there was a Nursing Supervisor?

The Principal Tutor with some evidence of pride stated that all decisions came through the CON in this is 500 bed research and referral hospital for the North East States of India?

**When Nurse Educators responsible for the administration of Nursing Education denigrate the role of Nursing Service Administrator, it is no wonder that Nursing Services are rapidly degenerating**

## Facts speak louder than words

It is high time we addressed the question **WHY** is this true of a so called prestigious institution?

### Principles of Unity and Equality

**'The origin of human rights is creation.  
Man has never acquired them.  
Nor has any government or other authority  
conferred them.  
Man has had them from the beginning.  
He received them with his life from the Maker.  
They are inherent in his creation.  
They have been bestowed on him by his Creator.'  
(Thomas Paine)**

### Desecration and Violation

**Desecration of the principles of  
unity and equality amount to  
the violation of human rights.**

**The divine purpose of human  
rights is 'dignity, equity, and  
responsibility'.**

.The Principal Tutor gave the Modules a cursory glance with no expression of interest. A faculty member proved to be the Nurse that the TNAI General Secretary had asked me to contact due to the complete lack of response over many months to all correspondence from Delhi. This bright young woman stated that 'things take time but they had formed a group and were notifying TNAI. There was no suggestion of regret in having ignored the correspondence.

A brief tour of the CON preceded an introduction to the Administrative Director a Doctor, by the Nurse Consultant and Nurse Supervisor, both of whom had expressed interest in what we had to offer.

This Doctor made it clear that all decisions for Nursing Service had to come through the CON and this would take time! He brushed aside each attempt to discuss, his focus was on expense. When assured that there was no cost to the institution, he all but ridiculed.

Back to the CON we collaborated to present him with a written request to meet with the Nurse Supervisor and senior Nursing personnel, at noon next day for a 2 hour introductory session.

On arrival it was a shock to find the spirit and warmth of the previous day transformed into one of avoidance and embarrassed business. The Consultant now had no time, all was in the hands of the Nursing Supervisor it was her decision and nothing to do with the CON?

I went alone to the Supervisor, in due course the Administrative Director called us to return my written request now bearing the gist of what he was verbalizing in no uncertain terms.

The key of several points were

1. The introductory lecture had to be purely technical.
2. There was to be no mention of God.

His non-stop tirade started and finished by denigrating the Nurses. At the same time taking opportunity to display his own great learning.

- Nurses would not understand English, especially my English. He had tested out so many and not one knew the meaning of *vignette* which he displayed on a paper .he was writing.
- The Constitution of India was no longer relevant and was in the process of being changed.
- He appreciated the 'poems' in our song book , he had read the Revelation and visited all the important religious shrines BUT Nurses were not permitted to mention the word God?

Obviously this Doctor saw each patient as a mere object devoid of any feelings, emotions or deep needs when facing the life and death crisis that had precipitated his/her hospitalization.

Did he have a wife and children?

When he is dying, a Naso-gastric tube and Urethral catheter in situ, strung up to I.V tubes and gadgets will he only want a 'technical approach' by the Nurse?

**Position has importance  
But  
Character has value**

This Administrative Director got a shock when I signed the paper as he then stated and re stated:

'You make one slip and we will catch you. Just remember we are watching and one slip and we will catch you'!

This sign displayed at a prominent junction of the Black Cat Military Cantonment in Gangtok ought to be the subject of Continuing Education for all the Medical Administrators of the Manipal Central Referral Hospital. One of the largest teaching hospitals in the North East of India.

The 'Nurse Supervisor' and her deputy were now free to organize twelve Staff Nurses who hold 'In-Charge Positions' and 3 hours after our scheduled time we were able to commence our session.

### Comment

The time has come in Nursing in India, for this multifaceted oppression by Medical Administrators of Nurses, to be challenged. Not with the aggressive methods of the world, but with the Resurrection Power of the Living Christ who, when rebuking the windstorm said to the sea '*Peace be still*' and the wind ceased and there was a great calm. Mark 4:39

His word to the disciples is relevant to Nurses caught in this violent windstorm of oppression

**Why are ye so fearful,  
O you of little faith.'  
Mathew 8:26**

### *What this particular Medical Administrative Director did not know*

#### **Nurses take Note**

- ✓ The Constitution of India stands in a Court of Law and every citizen, including every Nurse, has the freedom to claim the rights clearly stated therein with the responsibility.
- ✓ The Old Testament book of *Esther, the star of the East*, does not mention the name of God, yet the power of God is clearly demonstrated through both Queen Vaishti and Queen Esther's responses to evil intent.
- ✓ Both women suffered in different ways but their legacy of truth, justice and human worth to a depraved world is an historical fact.
- ✓ That same wisdom and power is available to every Nurse and person who comes with integrity of heart to God.
- ✓ Signing the paper did not bring fear because of my freedom to silently ask, as the AD talked, for obedience to the wisdom and power of God to control the situation. The line of communication to a Holy God is direct from a clean and prepared heart and mind.
- ✓ Time '*wasted*' gave time to silently pray about the obvious obstructions to Nursing competence and morale and their negative effects on the quality of patient care.
- ✓ An Administrative Director, Medical or otherwise is neither qualified nor has the authority to dictate the content of educational programs for qualified Nurses. ***Contribute yes, but dictate no.***
- ✓ This blatant overt obstruction designed to intimidate and further undermine Nursing confidence was stayed because of the many Nurses in India and the world, who were and continue to pray for the Nurses in Sikkim.
- ✓ The twelve In Charge Nurses attending received the Modules and three took the song books.
- ✓ The Nurse Supervisor took all three resource materials and in the quiet of her office we prayed for every Nurse and the Institution.
- ✓ This Administrator is actively destroying his own institution and like the '*Fallen Angels*' will be held accountable in the Day of Judgment.
- ✓ He condemns himself by not wanting and therefore denying the truth of Jesus words '*The thief does not come except to steal and to kill, and to destroy. I have come that they may have life, and that they may have it more abundantly*' John 10:10

**‘Abandon hope all ye who enter in’**

**Florence Nightingale.**

These words, penned by Florence Nightingale on entering the gates of the Nursing Establishment of the English General Hospital as the Nurse Administrator *ought not to be relevant in the 21<sup>st</sup>. Century*, let alone to a large 500 bed Central Referral Hospital that offers its services to the North East of India

### **What about the Nurses?**

The grapevine would have worked overtime, no doubt contributing to the long delay in assembling, and the apprehension evidenced as we commenced the session.

Rapport was quickly gained as each Nurse made her contribution .This mutual sharing was greatly facilitated by the quality and versatility in the use of English by all GNM’s and most ANM Nurses throughout Sikkim

Having established that not one Nurse had wanted to be a Nurse, it was thrilling to see their interest and responses as each module was introduced as an aid to helping each one make every day a masterpiece.

With 12 Nurses taking the Modules a total of 72 single modules now provide a significant resource within the Department of Nursing Services along with 3 Song books. The New Testaments were not offered to the group However, additional time with the Nursing Supervisor who had taken all 3 resources, gave opportunity to conclude by praying specifically for her and all the Nursing personnel.

This Nursing Supervisor had taken early retirement from the Military Nursing Service where as a Nursing Officer she had more authority, status and salary. The lure of a ‘dream’ that has not blossomed is made bitter by the sugar coated deception that takes place prior to appointment. This could be reversed as Nurses within MCRH unite to fulfil their pledge under God’s hand which is not shortened.

### **Underlying intent and Covert purpose**

**Cowardice breeds deception and lies when man allows the devil and his angels to influence the course of justice.**

#### **Appendix II identifies**

1. The needless suffering of a patient admitted for a relatively minor surgical procedure resulting in 2months hospitalization instead of 1 or two days. Subsequent admission, correct diagnosed and more surgery in a Military Hospital which aided but could not eliminate the pain and suffering over many months and by the constantly deferred promises of compensation.
3. The administration of gross injustice to the four Nurses who were suspended for ‘speaking up’ is a clear demonstration of the *evil intent of fallen man*.
4. It does not matter that Nurses are wrongly accused, they have no right to speak and like Queen Vaishiti these Nurses suffered unjustly for their integrity.
5. The truth will be known and cannot be hidden for ever.

Nurses more than ever need to be united in gaining wisdom to strengthen each other in honest appraisal through objective and critical assessment. Nurses need to support one another in courageous expression of their convictions, and fail not to be just and merciful advocates for each patient

**The task  
Is formidable.  
Problems abound  
The challenge is great.**

In loving kindness Jesus came  
From sinking sand He lifted me,  
With tender love He lifted me,  
From shades of night to plains of light,  
O praise His name, He lifted me.

**Our resource is greater.  
It will not fail.  
When  
Nurses stand in prayer  
At the throne of Grace.**