

## History of Nursing and Documentation Innovation

- [The Royal College of Nursing Library and Archives](#) has a wonderful treasure trove of resources, including multiple diaries, personal letters, and many, many organizational reports, minutes, and journals focused on improving healthcare, especially in both urban and rural areas of the United Kingdom.
- I love the 99% Invisible podcast, which is all about design things the average person doesn't think about. Check out Tim Harford's very cool episode on Florence Nightingale and her data visualizations, including the legendary Nightingale Rose, here: [Florence Nightingale: Data Viz Pioneer - 99% Invisible \(99percentinvisible.org\)](#)
- I respect and honor Florence Nightingale and her innovations, but her primary contributions to nursing education were in documentation, data visualization and statistics, record keeping, administration, and marketing. It's important to acknowledge that like many people in the Victorian age (1837-1901), she built on the knowledge of others (for instance, the Deaconess program at Kaiserswerth), used her own social connections as much as she possibly could to advance her own personal agendas, and was very prescriptive about who could join her ranks, to the point where we now recognize some of her approaches as based in classism and racism. To learn more about her Jamaican-Scottish contemporary Mary Seacole, who also transformed army nursing but was excluded by Nightingale, check out <https://nursejournal.org/articles/how-mary-seacoles-dedication-to-healing-shaped-nursing/>

## Current Health Conversations and Data/Document Driven Improvements

- Right now, nursing organization leaders and policymakers are VERY EXCITED about the many ways that data and documentation can be used to improve patient care. Check out the [Healthy People 2030 report](#), datasets, and support toolkits.
- Health organizations are also starting to FINALLY recognize the way that physical, social, and spiritual environments can impact a person's physical and mental health and are starting to more proactively address the [social determinants of health](#). (Interestingly, this is something that Isabella Morris Gilmore was already doing on the ground in the 1880s; there are also indicators that other medical professionals have been aware of this going back to at least the 1100s!)
- Issues with record management (especially virtual record management) continue to be a major area of concern. However, one advantage is that nursing researchers can now quickly access large data sets and create interventions to address health concerns in their local communities. Disadvantages include how data is input and shared, who is responsible for inputting the data, who OWNS the data, and how venture capitalists are highly interested in exploring this data lake, just as they have dived deeply into higher education's data lake in recent years. Interested in exploring this more? Check out the *Journal of Law, Medicine and Ethics*—I really like McGuire et al.'s 2019 "Who Owns the Data in a Medical Information Commons?," which does a neat job of exploring just who DOES own data and documentation. (Hint: in almost every state, it is NOT the patient!)
- The American Association of Colleges of Nursing (AACN)'s 2022 [Reimagining Nursing Education](#) offers some interesting insights into how data and documentation can be used in the educational environment, especially as new teaching methodologies involving simulations or VR start to be used more broadly.

- Health care documentation and integrity can have real-life harmful consequences for patients and providers both! There's an intriguing organization called the Association for Healthcare Documentation Integrity that's trying to address these concerns. Check out their materials, including infographics, here: <https://www.ahdionline.org/page/hdiweek>.

### **Communication, Computers, Accessibility, and Nursing Documentation**

- The [National Institutes of Health](#) have some terrific resources available on how to use plain language in all aspects of healthcare, including documentation. Frankly, some of the resources can be transferred quite easily to just about any tech setting!
- Computers and informatics have been a wonderful tool for nurses, practically since computers were invented. Blažun Vošner et al., 2020, have a very cool article that traces the history of how computers have helped nurses address global health issues. (Feel free to e-mail me at [rebekah\\_greene@urmc.rochester.edu](mailto:rebekah_greene@urmc.rochester.edu) for a copy!)
- I like this [PowerPoint](#)—it does a good job identifying the 4 C's of communication, provides examples of notes, and offers some good strategies for improvement of notes. And yet the question remains: how do you “translate” health information via nursing documentation for the patient or their loved ones or caregivers to help them understand what's happening to them in their personal moment of crisis in a jargon-free, compassionate fashion?
- What are the 4C's of Communication in Nursing? [Cynthia Saver with American Nurse](#) describes them as clear, concise, correct, and compelling.
- As I keep thinking about ways to help my students improve their own documentation skills, I find myself leaning a lot on accessibility resources like <https://www.section508.gov/create/documents/> for help with developing things like presentations.