Patient Acuity, Nursing Workload, & Missed Care in the Intermediate Care Unit

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Introduction & Background

No IMCU clinical standard

- Patient acuity
- Nursing workload
- Incidence of missed care

- 15% of patients admitted to IMCU require ICU transfer later
- Missed care = delayed, partially completed, not completed care

Design: Retrospective data and survey questionnaires over 12-weeks
Setting: IMCU at a large academic medical center in urban city of Maryland
Sample:
- a) Adults admitted to IMCU 7/2012-12/2012
- b) Adults who worked with IMCU patients 9/2021-12/2021

Methods

- Presented PowerPoint for nursing staff to introduce project and roles
- Conducted focus group to explore missed care events
- Used descriptive statistics for data analysis

Results

Table 1

<table>
<thead>
<tr>
<th>Variable</th>
<th>How many days was the shift (SD)?</th>
<th>How physically was the shift (SD)?</th>
<th>How familiar were you in accomplishing your nursing tasks for your shift (SD)?</th>
<th>How hard did you have to work to accomplish your level of performance (SD)?</th>
<th>How traces?</th>
<th>Incidence (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 year (n=2)</td>
<td>17.00 (0)</td>
<td>16.00 (1.41)</td>
<td>18.00 (1.41)</td>
<td>13.00 (2.83)</td>
<td>18.50 (3.54)</td>
<td>19.00 (2.83)</td>
</tr>
<tr>
<td>1-3 years (n=10)</td>
<td>12.50 (3.54)</td>
<td>10.00 (0)</td>
<td>15.50 (3.54)</td>
<td>10.00 (3.56)</td>
<td>15.50 (4.97)</td>
<td>14.50 (3.36)</td>
</tr>
<tr>
<td>3-5 years (n=10)</td>
<td>11.00</td>
<td>13.00</td>
<td>15.00</td>
<td>17.00</td>
<td>13.00</td>
<td>4.90</td>
</tr>
<tr>
<td>&gt;5 years (n=10)</td>
<td>14.50 (0.95)</td>
<td>16.50 (1.22)</td>
<td>16.50 (0.73)</td>
<td>15.60 (3.22)</td>
<td>16.01 (1.43)</td>
<td>10.50 (1.12)</td>
</tr>
</tbody>
</table>

Mean Perceived Nursing Workload & Nursing Experience Level

- All nurses reported labor issues for missed care regardless of experience
- Inadequate staffing was the top reported reason for missed care
- NGN cited 2x as many communication issues for missed care than nurses with 3-7 years experience
- Nurses <7 years experience reported higher frequencies of poor backup from team, inadequate assistive personnel, and unexpected rise in patient volume or acuity

Effect of NGN on Quality of Patient Care

- NGN rated highest for mental demand, feeling hurried, effort to accomplish, and performance, negative feelings
- NGN rated lowest feelings of success in accomplishing nursing tasks

Focus Group Responses on Missed Care Events

- "[We] hired a lot of new grads, hence strength is gone"
- "Poor team relationships with ICU team, "did not close the loop about [translating] management"
- "Communication between the resident and the nurses are not there [Because of] no trust or expertise"
- "Consult doesn’t get [communication] down, [they] get outbid...
- "Intensives always say no [to nursing consult], [they] need more support and appropriate resources in an acute situation"
- "Who can disclose much to when they are feeling overwhelmed? This must be addressed to improve teamwork"
- "[Lack] of nursing autonomy and empowerment for new grads"
- "[We] need to empower new grads to feel comfortable with themselves and encourage them to ask for help or communicate"
- "Collaboration is difficult without knowing the resources or answers"

Results (cont.)

Table 3

Focus Group Responses on Missed Care Events

- We need to “let someone know they are not alone, [give] someone to talk to”
- "Strongly encourage lunch breaks for [the] fall hour [and] buddy nurses to cover each other"
- "[Have] charge and a mentor to help cover"
- "NGN hired a lot of new grads, hence strength is gone"
- "Poor team relationships with ICU team, "did not close the loop about [translating] management"
- "Communication between the resident and the nurses are not there [Because of] no trust or expertise"

Table 2

<table>
<thead>
<tr>
<th>Reported Reasons for Missed Care Events &amp; Level of Experience of the Nurse Who Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
</tr>
<tr>
<td>Missed care &amp; Level of Experience of the Nurse Who Reported</td>
</tr>
</tbody>
</table>

- Themes: communication, new graduates, teamwork, support, resources
- Miscommunication and lack of nursing experience contributed to missed care
- Strategies: take breaks, buddy systems, ask for help, mentorship opportunities

Conclusion

- There is a positive association between nursing workload, and frequency of missed care events
- NGN experienced highest workload burden and were the most likely to miss care related to communication issues
- Focus group suggests interventions that support NGN to nursing workload and [missed care events]
- Interventions: preceptorships, nursing resources, cultivating strong teamwork, and adequate staffing

References