

A comparison of activities undertaken by enrolled and registered nurses on medical wards in Australia: An observational study

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Abstract

Background: The past decade has seen increasing patient acuity and shortening lengths of stays in acute care hospitals, which has implications for how nursing staff organise and provide care to patients.

Objective: The aim of this study was to describe the activities undertaken by enrolled nurses (ENs) and registered nurses (RNs) on acute medical wards in two Australian hospitals.

Design: This study used structured observation, employing a work sampling technique, to identify the activities undertaken by nursing staff in four wards in two hospitals. Nursing staff were observed for two weeks. The data collection instrument identified 25 activities grouped into four categories, direct patient care, indirect care, unit related activities and personal activities.

Setting: Two hospitals in Queensland, Australia.

Results: A total of 114 nursing staff were observed undertaking 14,528 activities during 482 h of data collection. In total, 6870 (47.3%) indirect, 4826 (33.2%) direct, 1960 (13.5%) personal and 872 (6.0%) unit related activities were recorded. Within the direct patient care activities, the five most frequently observed activities (out of a total of 10 activities) for all classifications of nursing staff were quite similar (admission and assessment, hygiene and patient/family interaction, medication and IV administration and procedures), however the absolute proportion of Level 2 RN activities were much lower than the other two groups. In terms of indirect care, three of the four most commonly occurring activities (out of a total of eight activities) were similar among groups (patient rounds and team meetings, verbal report/handover and care planning and clinical pathways). The six unit related activities occurred rarely for all groups of nurses.

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Conclusion: This study suggests that similarities exist in the activities undertaken by ENs and Level 1 RNs, supporting the contention that role boundaries are no longer clearly delineated.

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What is already known about the topic?

- Increased patient acuity and decreased length of hospital stay have intensified nurses' work in the acute care setting.
- Large shortages of RNs are predicted for the future.
- The work sampling technique has been used to document the activities undertaken by nurses in hospitals.

What this paper adds

- The actual activities undertaken by ENs and Level 1 RNs are not particularly different, suggesting a blurring of roles.
- Almost half of the nurses worked part time, which may have important implications for continuity of care.
- Almost 50% of the activities undertaken by nursing staff were indirect patient care activities, undertaken away from the patient's bedside.
- Nursing staff are spending about 25% of their time in various forms of team communication.

1. Introduction

The past decade has seen increased patient acuity and shortened lengths of stays in acute care hospitals (Australian Institute of Health and Welfare (AIHW) 2006a; Graf et al., 2003), resulting in an intensification of the work undertaken by nursing staff in hospitals. This intensification has been compounded by the proliferation of health care roles, and a blurring of skill boundaries (Crossan and Ferguson, 2005; Jones and Cheek, 2003; Spilsbury and Meyer, 2001). Skill mix is a broad term that refers to the mix of staff in the workforce and can also refer to the combination of skills available at any one time (Buchan and Dal Poz, 2002). In recent years, administrative databases and chart audits have been used to demonstrate an association between workload, skill mix and patient outcomes (Aiken et al., 2002; Blegen et al., 1998; Needleman et al., 2002) however less is known about the activities of various levels of workers at both the individual and ward level. This study examined the care delivered by registered nurses (RNs) and enrolled nurses (ENs) in acute medical wards in two Australian hospitals. The

findings provide insight into the similarities and differences in the work undertaken by various levels of nursing staff. Such information may be useful to those responsible for planning nursing rosters with an appropriate skill mix and to individuals who are considering the areas of work in which they are most suited to work.

2. Background

A number of studies have examined the work performed by the nursing workforce in acute care hospitals. For example, [Urden and Roode \(1997\)](#) examined the activities undertaken by RNs and Licensed Practical Nurses (LPNs) in one hospital in the United States. Activities were separated into five categories of activities; direct care (patient care activities in close proximity to the patient), indirect care (activities related to patient care but undertaken away from patients), unit related care (clerical work, education, meetings, etc.), personal (i.e. breaks) and documentation. [Urden and Rood \(1997\)](#) identified RNs and LPNs were spending 37% and 36% of their time on direct and 22% and 24% of time on indirect patient care activities. More recently, [Lundgren and Segesten \(2001\)](#) examined RNs' activities on one medical-surgical ward in Sweden and found similar patterns for direct care but slightly more indirect care and unit related activities than [Urden and Roode \(1997\)](#).

[Duffield](#) and colleagues have undertaken several studies of the activities of Australian hospital nurses ([Duffield and Wise, 2003; Duffield et al., 2005; Pelletier et al., 2005](#)). In one study conducted in a private hospital, [Duffield and Wise \(2003\)](#) found 40% of all nursing staff's activities (including RNs, ENs and AINs) were spent on indirect care and 29% on direct care activities. Another study demonstrated about 7% of all observations by nursing staff in five wards of two Australian hospitals involved documenting care ([Pelletier et al., 2005](#)). No studies that considered differences or similarities in the activities undertaken by various levels of nursing staff specifically in the medical ward area were found, however a recent Australian study did survey RN, EN and AIN union members about their work ([Hegney et al., 2006](#)). Respondents reported their workload was heavy, the skill mix was often inadequate and the majority were unable to complete their work in the time available. A second recent Australian study

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