

Missed Nursing Care in the United States: Provider Resources, Cost, and Care Quality

[Name]

[Course Name]

[Date]

Researchers in the United States have produced empirical evidence of a relationship between nursing resources and care quality. A survey of 729 acute care patients at two Midwest hospitals found that higher staffing levels relative to workload led to less missed care and better timeliness of care, particularly when a higher RN skill mix was present (Dabney & Kalisch, 2015). While this cannot be generalized to all U.S. healthcare systems, the use of the MISSCARE-Patient survey provides some external validity with other U.S. studies. One such study applied MISSCARE to neonatal intensive care (NICU) units in seven states, and found that higher patient volume contributed to more missed care (Tubbs-Cooley, Pickler, Younger, & Mark, 2014). This study also corroborated Willis et al. (2015) in finding that oral care and parent education were among the most commonly missed activities.

Likewise, an Australian study of 354 acute care nurses using the MISSCARE survey found that higher work intensity led to increased care rationing, in such a way that interventions considered less critical, such as ambulation and mouth care, were ignored in favor of those that provided more immediate benefits, such as glucose monitoring and medication administration (Willis et al., 2015). However, it is difficult to generalize these results. The study defined work intensity as both longer shifts and increased patient volume, but did not account for factors such as the type of care or the skill composition of the nursing staff. Similarly, while the MISSCARE survey is a well-developed and commonly-used measure of missed nursing care, it has been adapted for use in individual countries to accommodate their healthcare systems.

As a result, some elements of this study may not reflect conditions elsewhere in the world. For example, an Icelandic study using MISSCARE found that incidents of missed care are more closely related to unit type and nurse role (Bragadottir, Kalisch, & Trygvadottir, 2016)

both of which could affect how nurses choose to ration care and the impact those choices have on patient outcomes.

One implication of the above findings is that when faced with the decision to ration care, the short-term benefits that nurses tend to favor can lead to poor long-term outcomes. Research by Giuliano, Danesh, and Funk (2016) that considered cardiology units of varying sizes across a wide geographical area found a significant difference ($P=.021$) in readmission rates in units with higher patient-nurse ratios. Other studies have identified similar results. A broad cross-sectional study by Brooks-Carthon, Lasater, Rearden, Holland, and Sloane (2016) found that missed care led to higher 30-day readmission rates for elderly black patients, and that this was correlated with missing less immediate tasks such as documentation ($OR=1.16$) and patient discussion ($OR=1.09$). This study involved 69,025 patients at 235 hospitals in three widely different states, and so provides strong evidence that rationing due to missed care and the decisions it leads to negatively affects long-term patient outcomes.

References

- Bragadóttir, H., Kalisch, B., & Tryggvadóttir, G. (2016). Correlates and predictors of missed nursing care in hospitals. *J Clin Nurs*. <http://dx.doi.org/10.1111/jocn.13449>
- Brooks-Carthon, J., Lasater, K., Rearden, J., Holland, S., & Sloane, D. (2016). Unmet Nursing Care Linked to Rehospitalizations Among Older Black AMI Patients. *Medical Care*, 54(5), 457-465. <http://dx.doi.org/10.1097/mlr.0000000000000519>
- Dabney, B. & Kalisch, B. (2015). Nurse Staffing Levels and Patient-Reported Missed Nursing Care. *Journal Of Nursing Care Quality*, 30(4), 306-312. <http://dx.doi.org/10.1097/ncq.0000000000000123>
- Giuliano, K., Danesh, V., & Funk, M. (2016). The Relationship Between Nurse Staffing and 30-Day Readmission for Adults With Heart Failure. *JONA: The Journal Of Nursing Administration*, 46(1), 25-29. <http://dx.doi.org/10.1097/nna.0000000000000289>
- Tubbs-Cooley, H., Pickler, R., Younger, J., & Mark, B. (2014). A descriptive study of nurse-reported missed care in neonatal intensive care units. *J Adv Nurs*, 71(4), 813-824. <http://dx.doi.org/10.1111/jan.12578>
- Willis, E., Henderson, J., Hamilton, P., Toffoli, L., Blackman, I., Couzner, L., & Verrall, C. (2015). Work intensification as missed care. *Labour & Industry: A Journal Of The Social And Economic Relations Of Work*, 25(2), 118-133. <http://dx.doi.org/10.1080/10301763.2015.1060811>