Comparison of Unfinished Nursing Care perceptions between registered nurses and nurse managers in acute care settings: a cross-sectional multi-centre study

Background

It is suggested that Nurse Managers can influence Unfinished nursing care (UNC) levels through effectively managing nurses' working conditions, allocating duties and coordinating available resources(1). However, the studies focus on nurse managers' leadership skills(2, 3) rather than on their perception of the quality of care delivered under their watch.

Aim(s)

The aim of this study was to compare the perceptions of Nurse Managers (NMs) and Nurses with respect to the quantity, type of Unfinished Nursing Care and underlying reasons in the different acute care settings of all the Hospital Trusts of the Veneto Region, Italy.

Methods

The study followed a cross-sectional, multicentric design. The occurrence of UNC was measured using the questionnaire "Unfinished Nursing Care Survey"(4), which investigated degrees of omission of nursing activities and perceived reasons behind it. Data collection was carried out in the period 2020-2021. All the Registered Nurses (RNs) and NMs working in medical, surgical, urological, orthopaedics and geriatric units of primary, secondary and tertiary tiered hospitals were invited to participate.

Results

2179 RNs providing direct patient care and 159 Nurse Managers (NMs) completed the questionnaire, for a total sample of 2332 participants and 37 participating hospitals. 69.1% of NMs defined as always/ nearly always adequate the human resources assigned to their unit compared to only 41.5% of RNs. RNs and NMs showed congruence of perception of the level of UNC in all but 4 items, pertaining to adequacy of handover to the next RN shift, go to patients to introduce themselves or go without being called and mouth care. As regarding the reasons behind UNC, there was a trend of 12 unaligned perceptions between RNs and NMs. NMs consider inaccurate initial priority setting ($p < 0.02$) and inadequate priority re-assessment during shift ($p < 0.01$) as elements leading more significantly to UNC compared to RNs. RNs blame items referring to communication tension/conflicts within the nursing staff and with other team members (p 0.01), lack of material resources and inadequate human resources ($p < 0.001$).

Discussion

Nurses reported that they prioritize clinical monitoring and hands-on activities. This perception is consistent with the one expressed by NMs, indicating that NMs hold strong clinical competencies and have a clear vision of the routine activities performed in their hospital units, even if their responsibilities place them farther away from the patient bedside compared to RNs. NMs can compare the number of resources available to their units and their associated skill mix against the resources available to other units or hospitals and therefore may tend to judge their context less harshly compared to RNs. Conversely, RNs bear most of the weight of nursing shortages and may be more sensitive to the consequences of ineffective management.

Implications and future perspectives

NMs maintain strong clinical knowledge and perception regarding unfinished nursing care aligned with their RNs. NMs have influence over several aspects of the work environment, including resources, teamwork, staff relationships, managerial ability and leadership, and are in the perfect position to spearhead and develop local initiatives to improve practices to promote the reduction of UNC.

References

1. Kim KJ, Yoo MS, Seo EJ. Exploring the Influence of Nursing Work Environment and Patient Safety Culture on Missed Nursing Care in Korea. Asian Nurs Res (Korean Soc Nurs Sci). 2018.

2. Zaghini F, Fiorini J, Piredda M, Fida R, Sili A. The relationship between nurse managers' leadership style and patients' perception of the quality of the care provided by nurses: Cross sectional survey. International Journal of Nursing Studies. 2020;101:103446.
3. Lee SE, Hyunjie L, Sang S. Nurse Managers' Leadership, Patient Safety, and Quality of Care: A Systematic Review. West J Nurs Res. 2023;45(2):176-85.
4. Bassi E, Tartaglini D, Valpiani G, Grassetti L, Palese A. Unfinished Nursing Care Survey: A development and validation study. Journal of Nursing Management. 2020;28(8):2061-71.