Safe Practice Environments: Nurses’ Perceptions of Stressors and Solutions

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Safe patient care depends on partnership and teamwork among health care providers.

Effective teamwork relies on communication and mutual support among team members.

Stressors in the workplace impact the nursing practice environment and compromise safe practice.
Stressors and Safe Practice

- Unaddressed stress disturbs teamwork processes
- Stressful setting
  - poor communication
  - disturbed teamwork
  - unsafe practice setting
Examples

• Do not ask for help with procedures, e.g., moving patients, even when needed

• Do not ask for double-checks even when in doubt

• Do not ask for relief for breaks

• Do not communicate needs of their patients that they cannot meet themselves
Problematic Outcomes

- Clinical errors
- Medication errors
- Workplace injuries
- Fatigue
- Burnout
- Disruptions in safe care
- Disengaged staff
- High vacancy rates
- Staff turnover
- Bullying / violence
- Sabotage
- Decreased capacity for vigilance
Need

• Determination of the stressors that affect individual nurses as well as teams in the ICU environment will contribute to the identification of skills and behaviors that facilitate effective teamwork and foster safe practice environments
Research Questions

What are nurses’ perceptions of stressors that affect nursing practice on an intensive care unit?

What are nurses’ perceptions of behaviors that facilitate safety in the nursing practice environment of an intensive care unit?
Methods

• Qualitative descriptive study
• Setting: 26 bed ICU in small town, southern state
• Data: obtained from 6 focus groups of 6-8 nurses each, 34 participants total
Methods

• Interview question topics:
  – Coping with difficult situations
  – Challenging and disruptive factors in practice environment
  – Communication and teamwork on the unit
  – Ways to improve work environment and enhance safe practice
Findings - Themes

- Leadership Challenges
- Staff Support and Communication Issues
- Critical Thinking Needs
- Resource Availability Challenges
- Nursing Practice Environment Issues
Leadership Challenges

- Recognition – respect – shared governance
- Adequate orientation – accountability
- Favoritism – structural stressors
Leadership - what they said

- ‘treat us like professionals – sometimes we’re not even treated like adults’

- ‘To improve communication b/t admin and us, the most useful thing would be to drop the word ‘mandatory’ - it’s everywhere – it’s a joke’

- ‘--- confront tiny things but not large things that actually matter to pt safety – if they did, might have to suspend that person and that would be problem for staffing’
Staff Support and Communication Issues

- Communication of needs – collaboration
- Culture of support as well as accountability
- Responsiveness to needs of others
Staff Support / Communication Issues - what they said

- ‘whether or not you get support depends entirely on who your neighbors are – period’
- ‘buddy system doesn’t work if you have bad buddy who takes lots of breaks, texts, talks on phone’
- ‘anybody can write up anybody – some people use in retaliatory way’
Critical Thinking Needs

- Collaboration with intensivists – mentoring
- Confidence in decision-making skills
‘nurses get criticized if they make decisions and criticized if they don’t – the thing is, nurses need to understand that they’re accountable whether they understand what’s going on or not’

‘two [of the intensivists] have a ‘don’t bother me at all’ attitude; that’s a problem for good care’
Resource Availability

Challenges

- Functioning equipment – adequate supplies
- Culture that promotes good stewardship
Resource Availability Challenges - what they said

• ‘lots of equipment we have here is not taken care of – you can watch some people throw something on the counter, not even turn it off, and then get mad when the batteries are dead’

• ‘when you work in ICU, you expect to put out fires – you love that – but you don’t expect to not have supplies and good equipment’
Nursing Practice
Environment Issues

- Support services for nightshift
- Manage visitation – use ancillary personnel
- Make information readily available
Nursing Practice Environment
Issues – what they said

• ‘when 5 people are turning a 400 pound patient, that means 8 patients are not being watched – give us enough staff to provide safe care’

• ‘family can suck every ounce of energy out of you looking for that one ray of hope’

• ‘no cafeteria after 8p – doesn’t sound so bad but is really awful to have no real food’
RECOMMENDATIONS
Recommendations: Leadership

- Guide development of a positive work environment that emphasizes safe nursing practice, effective teamwork, and quality patient outcomes
- Values ideas - show professional respect
- Actually teach nurses how to manage and lead
Maximize safe nursing practice by communicating needs, promoting a culture of accountability, and supporting quality care for all patients on unit.

- Make known issues overt and address
Recommendations: Critical Thinking

- Form partnerships with the intensivists and nurse leaders that include mentoring, bedside education, accountability, and other confidence-building strategies

- Increase culture of respect – decrease intimidation
Recommendations: Resource Availability

• Optimize nurses’ time at the bedside through the timely availability of appropriate operating equipment and supplies needed for patient care

• Repair and replace in timely fashion
Recommendations: Nursing Practice Environment

• Promote expansion of environmental resources that will support efficient, caring, and safe nursing practice

• Make changes in care environment based on nursing needs and safe practice,
Thank you for the opportunity to share what we are learning with you this morning!

Let’s assure that it’s a great time to be a nurse for every nurse, and a safe time to be a patient for every patient!

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