Registered Nurses and Digital Immigrants Resistance to Use of Technology

Melissia Tomblin MSN, RN

Lubbock Christian University

PURPOSE

The purpose of this pilot project is to evaluate the attitudes regarding technology of digital immigrants in order to improve nursing care and outcomes.



DISCUSSION

Digital immigrants are those born in the 1990's and before and who are resistant to the evolving use of technology in healthcare, are thought to contribute to the problem of missed care by ignoring electronic notifications or through failure to use available technologies to support patient care; however, the full impact of missed nursing care by technology nurse resisters is not fully understood (Piscotty, Kalisch, & Gracey-Thomas, 2015).

RESEARCH QUESTION

What is the effect of a technology training program as compared to standard policy and procedure information on nurses' level of resistance to technology use as measured by the MISSCARE Nursing Survey over a one month period?

SURVEY 1: Section A -	– Miaa	ed Nursi	ng Care		
durses frequently encounter multiple dema priorities, and not accomplish all the care ne moviedge, how frequently are the following nursing staff (including you) on your unit?	eded by	their paties of nurs	ents. To th	e best o	f your
	Always missed	Frequently missed	Oppositionally missed	Rarely missed	Herver missed
1) Ambulation three times per day or as ordered					
2) Turning patient every 2 hours					
Könnun 1: A blut - i	Othernion	emd hjäknu			
Hjúkrunerfræðinger og sjúkraliðar standa eit frem veidur því að þeir þurfa að forgangaraða verkefnum sjúklinger þeirra þerfnæt.					
Hweres oft or offirferendi þáttum <u>SLEPPT</u> í hjákrun þinni bestu vitund? Merkt u eingöngu eitt sver við í			og öðru starf	rfolki) san	kvæmt
	Affairt steppt	Oft Maggat	Stundum sleppt	Sjaliden steppt	Aldreii sleppt
l) Aðetoð við hreyfingu þriever á deg eðe senskvæmt fyrinnælum					
t) Sjöklingi endið á treggja tíma freeti				П	

BACKGROUND

Missed nursing care is a specialized type of error that is categorized by the Agency for Healthcare research and Quality as an "error of omission" (Agency for Healthcare Policy and Research [AHRQ], 2015). Missed care jeopardizes patient outcomes by impacting the patient through lapses in the provision of fundamental nursing and personal care health education (AHRQ, 2015). Technology plays an important role in patient safety by prompting the efficient provision of care (Nkosi, Asah, & Pillay, 2011). Notification of the nursing staff through the electronic health record for example, prompt medication safety and reduction of pressure ulcers and contribute to cultures in which patient safety are the norm (AHRQ, 2015). The lack of standardized guidelines and education for nurses in direct patient care may lead to an increase in preventable injuries, such as pneumonia and pressure ulcer development, and needs further investigation (Piscotty, Kalisch, & Gracey-Thomas, 2015).

RESULTS

Results from the study concluded that missed nursing care jeopardizes quality, safety and cost of patient care. A descriptive survey design was used. Data collected from the MISSCARE Nursing Survey, a two part quantitative and qualitative survey, was analyzed using SPSS version 22. Approval was obtain from the Institutional Review Board. Permission from the author of the MISSCARE Nursing Survey was granted. The survey was distributed to nursing students enrolled in the bachelor's of science degree program at Lubbock Christian University.

Demographics

The nursing students were 78.6% females and 14.3% males with the majority being between 25 and 44 years old (64.3%). Experience ranged from 2 to 10 years in nursing. Their highest educational level in nursing was an associates degree (ADN) (85.7%). The majority of the nursing students were employed as a staff nurse (RN), working 12 hour shifts during the day (71.4%) and were satisfied with being a nurse, working at least 32 hours a week (92.9%).

Quantitative Results

During their shift at work, the nursing students felt staffing was inadequate most of the time (78.6%) and felt satisfied with teamwork (57.1%). The results of this study analysis show a concerning amount of missed care. The most frequently cited missed care were ambulation (57.1%), medications administered within 30 minutes of scheduled time (42.9%), turning patients (35.7%), and patient teaching (35.7%). The least missed care was patient assessments performed each shift and bedside glucose monitoring.

Qualitative Results

The narrative comments indicated most were satisfied in their current position, and satisfied with being a nurse. The nursing students did feel staffing was inadequate most or all of the time, but most were satisfied with the level of teamwork.

Students Disciplinary Mediation Redeployment Paternity Employment Relationships Contracts Managing Grievance Pay Leave Leadership Management Staff Guidance Leadership Management Staff Guidance Restructuring Work Change University Policy Redundancy-Avoidance Recruitment Diversity Procedure Flexible-Working Development Parental

CLINICAL SIGNIFICANCE

Time management and critical-thinking skills are improved with nursing years of experience, enhancing practice competency, responsibility and commitment. The results of this limited study imply nurses require more detailed educational training on new technology programs with time to comprehend new knowledge learned; however, it is noted that formal and higher education supports knowledge learning. Regardless of adequate preparation and guidelines, responses from this limited study confirm nursing care is routinely missed. Continual evaluation of the level of staffing, effective communication, and delegation by an effective supportive management team promotes improved patient outcomes.

CONCLUSIONS

This small study is limited and suggests interventions must be proposed by nursing and hospital policy in order to enhance upon the present quality and safety of care.

Promoting efficient delegation requires continual evaluation of practice responsibility and individual accountability. Innovative policies must be enforced by an effective management team committed to the health, well-being, and safety of the patient. Efficient delegation and communication encourages understanding of expectations.

Information technology and healthcare costs are at the forefront in politics. Healthcare providers have a responsibility of bringing current evidence to light and implementing into practice. Cutting missed care by even a small amount, supported by evidence based research, is best practice for everyone.

Conclusions and evidence from this study suggest nurses require additional time for nominal missed care. Possible future directives include comprehensive training for staff, outcomes based on performance and a whole organizational focus on evidence-based practice.

CONTACT

REFERENCES

metomblin@yahoo.com

Available upon request