G1.1: Off-Peak Hospital Work Environments and their Effect of Nurses' Work: an Institutional Ethnography

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Abstract:
Introduction: Hospital activity peaks weekdays, 7AM to 7PM, when maximum resources are available in nurses’ work environments. But peak periods make up only 36% of the time nurses work. The majority of nurses’ work takes place in off-peak environments with fewer ancillary services, fewer staff, minimal supervision, and strained communication with on-call health care providers. Patient mortality increases during off-peak periods.

Method(s): Using Institutional Ethnography (IE) we describe what happens during off-peak periods. We are conducting two levels of data collection and analysis in hospitals in Dallas and Houston. In Level I we interview nurses to discover material connections between what nurses actually do in their work and what triggers those particular actions or events. Level II data will include such things as patient care forms that nurses must complete, staffing policies, performance improvement initiatives, Joint Commission requirements, and Magnet-designated hospitals’ performance standards.

Results: Our team (which includes nurses, economists and a health care administrator) identified the following influences on off-peak work environments: nurse staffing and productivity policies, communication (nurse-physician and nurse-nurse), team work, doctors’ orders, nurse competence, nurse autonomy, availability of supplies and support, physical strain and sleep deprivation, family responsibilities, and ethnic-racial tension between nurses.

Discussion & Conclusions: Organizations have rules and socially constructed relationships that serve to influence what persons do and how they are to do it. In hospitals, we take these rules and relationship for granted when they produce intended results. But, when unintended results such as increased off-peak mortality occur, there is a need to discover how the rules and relations are actually influencing individuals in their all day, every day work. This study, funded by Robert Wood Johnson, is producing knowledge that nurses and key decision makers can use to prevent negative side effects of managerial, economic and policy initiatives aimed at improving health care efficiency and patient outcomes during off-peak periods.

Abstract History:
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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