

Missed Nursing Care: Literature Review

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Missed nursing care is a significant healthcare problem worldwide. When care is delayed or missed, patients can suffer severe consequences. This literature review aims to provide an in-depth analysis of recent missed nursing care research and add credibility to the importance of missed nursing care (Houser, 2023). It will also contribute to the existing knowledge on missed nursing care and help further the research into finding solutions (Houser, 2023).

Missed Nursing Care in Surgical Care – A Hazard to Patient Safety: A Quantitative Study Within The inCHARGE Programme

Missed nursing care is something that unfortunately happens quite often (Edfeldt et al., 2024). This study aimed to investigate how often, why, and the relationship between the nurses and the nurse assistant perceptions (Edfeldt et al., 2024). This study is also part of the inCHARGE program, which was started by a research group at Uppsala University, where they aim to design change processes to help retain nurses and increase the utilization of nursing competence to improve patient care (Edfeldt et al., 2024). A survey was given in three surgical care units with nurses and nursing assistants, having them rank missed nursing care duties and the reasons behind them (Edfeldt et al., 2024).

Key Points

The researchers of this study aimed to find how often missed surgical care occurred, the reasoning behind it, and the perceptions of the nurses and nursing assistants (Edfeldt et al., 2024). The researchers used the Missed Nursing Care (MISSCARE) Survey to measure how often and why missed nursing care occurred, splitting the two into two parts (Edfeldt et al.,

2024). In part one, the respondents would rank different care duties between always being carried out and never being carried out (Edfeldt et al., 2024). In part two, the respondents would rank different reasons for not providing care, from being a significant cause to not a cause (Edfeldt et al., 2024). Tables were used in the article to show the exact care duties and reasons that the respondents ranked. It also asks the respondents about satisfaction with the job and their intention to leave (Edfeldt et al., 2024). This survey was distributed on paper to 118 staff members in three surgical care units at a university hospital in Sweden (Edfeldt et al., 2024). Of the 118 staff members, 63 were nurses, 53 were nursing assistants, and two of the participants were missing more than 50% of the values, so their surveys were not used (Edfeldt et al., 2024). The survey results revealed that 43 nurses and 25 nursing assistants were satisfied with their current positions; however, almost every fourth staff member, 29, intended to leave within a year (Edfeldt et al., 2024). It also revealed that 68.7% of the staff members believed adequate staffing was only achieved 50% or less of the time (Edfeldt et al., 2024). The missed nursing care duties ranked highest among nurses and nursing assistants were attending interdisciplinary meetings, turning patients every two hours, and ambulating the patients three times a day or as the provider ordered (Edfeldt et al., 2024). There were some differences in the ratings of care duties between nurses and nursing assistants, such as nurses ranking oral care as one of their highest missed care duties (Edfeldt et al., 2024). The survey results showed no significant difference between the nurses and nursing assistants; however, the ratings had a p-value of 0.33, possibly due to many nursing assistants not answering some questions (Edfeldt et al., 2024). The survey results also revealed that the two most significant reasons for missed nursing care were understaffing and unexpected rises in patient volume/acuity (Edfeldt et al., 2024). There were also some differences in the ranking between nurses and nursing assistants, such as nurses ranking heavy

admission and discharge activity as one of the top reasons (Edfeldt et al., 2024). The results of the data collected are significant in showing the amount of missed nursing care that occurs, the reasoning behind it, and how missed nursing care is a risk to patient safety.

Assumptions

The researchers stated that the main reason missed nursing care occurs is due to the inadequate staffing of nurses (Edfeldt et al., 2024). When missed nursing care begins to occur, this can mean that there may be a high patient-nurse ratio and workload (Edfeldt et al., 2024). The respondents in this study's survey believed that staffing was adequate only 50% or less of the time, and the nurse managers on the units stated that their units were understaffed by 20% of the nurses needed (Edfeldt et al., 2024). Because of these high patient-nurse ratios, nurse burnout and stress are also increased, causing them to leave; in this study alone, 24.6% of the respondents planned to leave within a year (Edfeldt et al., 2024). Finding a solution to creating a more acceptable patient-nurse ratio will increase job satisfaction, leading to more nurses remaining at work and decreasing missed nursing care, ultimately increasing patient safety (Edfeldt et al., 2024).

Deficit/Conclusion

The researchers' main reasoning behind missed nursing care due to inadequate nurse staffing is acceptable. Nursing shortages are not something new, and despite this, not much has been done to solve this issue (Edfeldt et al., 2024). Inadequate staffing leads to increased missed nursing care, which increases the risk of patient safety. This can lead to severe complications, causing the patient harm or prolonging their hospital stays (Edfeldt et al., 2024). Further research

and interventions must be done to solve this serious nursing issue. Nursing burnout, stress, and risk to patient safety will increase without finding a solution.

Missed Nursing Care in Emergency Departments: A Cross-Sectional Descriptive Study

Missed nursing care significantly affects the quality and safety of care and has become a concern internationally (Rooddehghan et al., 2024). This study aimed to investigate the types of missed nursing care and how often they occurred in emergency departments at different hospitals (Rooddehghan et al., 2024). The researchers used a researcher-made checklist and observations to determine the types and frequency of missed nursing care (Rooddehghan et al., 2024).

Key Points

The researchers of this study aimed to find the types of missed nursing care and how often they occurred (Rooddehghan et al., 2024). The researchers conducted a cross-sectional and descriptive-observational study (Rooddehghan et al., 2024). The participants of this study were 146 emergency room nurses from two different hospitals in Iran affiliated with Tehran University of Medical Sciences: Imam Khomeini Hospital and Shariati Hospital (Rooddehghan et al., 2024). Both hospitals have two emergency departments each (Rooddehghan et al., 2024). The data was collected using a demographic information questionnaire the participants completed in person and a researcher-made checklist used during each direct and indirect observation that helped determine the type and frequency of missed nursing care (Rooddehghan et al., 2024). This researcher-made checklist had 11 categories: registration, triage, physiological monitoring, patient condition monitoring, implementing orders, making decisions about the patient, patient communication, cardiopulmonary resuscitation, checking equipment/emergency

trolley, patient transfer, and infection control/environmental health (Rooddehghan et al., 2024). Each category contained various emergency department care duties ranging from six to 23 items (Rooddehghan et al., 2024). Each activity was marked and scored by the observer as done (score two), not done/delayed (score zero), or not required (score one) (Rooddehghan et al., 2024). Each category received a score from zero to 100; the higher the score, the lower the level of missed nursing care (Rooddehghan et al., 2024). The researchers used three tables in the article to show the exact care duties and frequency. The researchers also determined that 384 observations for each care duty were needed because no other similar studies were found (Rooddehghan et al., 2024). The results of the study showed that the area with the highest level of missed nursing care was in the patient communication category, with a mean score of 55.72 (Rooddehghan et al., 2024). The lowest level of missed nursing care was in the checking equipment/emergency trolley category, with a mean score of 80.81 (Rooddehghan et al., 2024). The other nine categories had a mean score ranging from 59 to 76 (Rooddehghan et al., 2024). The results also showed that these nursing care duties were the most frequently missed among the nurses: triage nurse's level two patient assessment time (26 times), temperature measurement (164 times), compliance with correct drug therapy process (212 times), bedrails up when patient is in bed (198 times), effective and reassuring communication (195 times), performance sterile technique in sterile procedures (203 times), giving follow up visit information after discharge (80 times), charting nursing care before it is performed (290 times), emergency trolley stocked at the beginning of the shift (77 times), and checking patient wristband and treatment equipment at next shift (170 times) (Rooddehghan et al., 2024). No p-value was calculated in the article. The results of the data collected are significant in showing the high level of missed nursing care that occurs in emergency departments (Rooddehghan et al., 2024). Identifying the areas and specific

care duties that are the most missed can help nurses and hospitals implement solutions to decrease the frequency and improve the quality and safety of care in emergency departments (Rooddehghan et al., 2024).

Assumptions

The researchers stated that the level of missed nursing care in emergency departments is high, with the highest being in patient communication (Rooddehghan et al., 2024). Not many studies have been done on missed nursing care in emergency departments (Rooddehghan et al., 2024). Therefore, the results of this study can be used to help further research into finding the reasoning behind missed nursing care, specifically in the emergency department (Rooddehghan et al., 2024). Finding interventions to decrease the frequency of missed nursing care in these different emergency department categories can improve the quality of care for emergency departments.

Deficit/Conclusion

The researchers' main reasoning behind conducting this study is acceptable. Due to the high pace of the emergency department, missed nursing care can happen often (Rooddehghan et al., 2024). In an emergency, every second is essential when delivering care to the patient, and any delay or missed care can lead to severe consequences (Rooddehghan et al., 2024). Further research and interventions must be done to identify the reasoning behind missed nursing care in the emergency department. Without finding a solution, the risk to patient safety will continue to increase, and the quality of care will continue to decline.

Prevalence of Missed Nursing Care and its Association with Work Experience: A Cross-Sectional Survey

Missed nursing care occurs when any aspect of care is delayed or missed (Mainz et al., 2024). Nurses are tasked with many care duties and are often forced to choose which duties to perform and which not to (Mainz et al., 2024). This study aimed to investigate the frequency and reasons for missed nursing care and whether a nurse's work experience could be a factor (Mainz et al., 2024). A survey was given to nurses at a Danish hospital in different surgical, medical, and mixed surgical-medical units to measure nurses' perceptions of missed nursing care (Mainz et al., 2024).

Key Points

The researchers of this study aimed to find the frequency and reasons for missed nursing care and whether a five-year or less nursing experience factored into the missed nursing care (Mainz et al., 2024). The participants of this study were nurses working in different medical, surgical, and mixed medical-surgical units at a Danish hospital (Mainz et al., 2024). 1,241 nurses were sent the survey; however, only 529 nurses completed it (Mainz et al., 2024). The data was collected using the Missed Nursing Care (MISSCARE) Survey, which was electronically distributed (Mainz et al., 2024). The survey was divided into three sections. The first section asked for basic information about the nurse, such as age, gender, unit, work experience, overtime hours, and job satisfaction (Mainz et al., 2024). In the second section, nurses were asked to numerically rate how frequently 24 care duties were missed, from “1=never/rarely missed, 2=occasionally missed, 3=frequently missed and 4=always missed” (Mainz et al., 2024, p. 3). In the third section, the nurses were asked to numerically rank the reason why these care duties

were missed, from “1=not a reason, 2=minor reason, 3=moderate reason, and 4=significant reason” (Mainz et al., 2024, p. 3). The researchers used tables and graphs to present the results of the study. The results of the study showed that over two-thirds of the nurses reported that the most frequently missed care duties were patient/family emotional support, bathing, assessing the effectiveness of medications, ambulation three or more times a day, oral care, attending interdisciplinary meetings, turning patients every two hours, and complete documentation (Mainz et al., 2024). The results also showed that the top reasons for missed nursing care were inadequate staff, unexpected patient volume/acuity rise, heavy admission/discharge activity, and urgent patient situations (Mainz et al., 2024). Nurse work experience was also a factor, as nurses with five years or less of experience reported more missed nursing care (Mainz et al., 2024). The p-value for the results of the MISSCARE survey was 0.011 (Mainz et al., 2024). The results of the data collected are significant in showing how often missed nursing care occurs and the reasons behind it. Nursing care duties that can lead to life-threatening complications were rarely missed compared to less critical care duties such as patient/family emotional support and hygiene (Mainz et al., 2024). Also, nurses with less experience reported more missed nursing care than those with more experience (Mainz et al., 2024). Inadequate staffing was reported to be the most significant reason that led to missed nursing care (Mainz et al., 2024).

Assumptions

The researchers stated that inadequate staffing was the most significant reason for missed nursing care (Mainz et al., 2024). The survey results showed that 86% of the nurses believed this to be the top reason for missed nursing care (Mainz et al., 2024). The staff shortage causes the nurses to have more patients in their care, leading to increased missed nursing care, risk to

patient safety, burnout, and low job satisfaction (Mainz et al., 2024). The researchers also stated that further research into the reasoning behind missed nursing care can help develop effective interventions to address this issue and help develop evidence-based policies and practices to improve the quality and safety of care (Mainz et al., 2024).

Deficit/Conclusion

The researchers' reasoning for missed nursing care is acceptable. Missed nursing care affects the quality and safety of care, which can lead to serious adverse events (Mainz et al., 2024). Hospitals' inadequate staffing of their nurses can lead to an increase in missed nursing care (Mainz et al., 2024). Without effective interventions to prevent missed nursing care and increase staffing, the risk for burnout and patient safety will continue to increase.

Conclusion

Missed nursing care is a serious issue that affects healthcare worldwide. Delayed or missed care can lead to a range of complications, from more extended hospital stays to death. The three articles analyzed in this literature review showed the most frequently missed nursing care and the reasoning behind them. The nursing care duties reported to be missed were similar between the three articles. These included emotional and supportive communication with the patients/family, ambulation and turning the patient, oral care, and attending interdisciplinary meetings (Edfeldt et al., 2024; Mainz et al., 2024; Rooddehghan et al., 2024). The main reason for missed nursing care was inadequate staffing (Edfeldt et al., 2024; Mainz et al., 2024). This information can help improve patient outcomes by bringing awareness to the care duties that are most frequently missed when delivering patient care. Decreasing the rate of missed nursing care will increase the quality of patient care and satisfaction, leading to decreased patient

complications. This will also help improve nursing practice by helping develop interventions to deliver quality patient care. With this information, effective evidence-based practices can be developed and implemented to improve the quality and safety of patient care. Missed nursing care is frequently occurring, and this research can contribute to eliminating this issue in healthcare.

References

Edfeldt, K., Nyholm, L., Jangland, E., Gunnarsson, A.-K., Frojd, C., & Hauffman, A. (2024).

Missed nursing care in surgical care – a hazard to patient safety: A quantitative study within the inCHARGE programme. *BMC Nursing*, 23(1),

233. <https://doi.org/10.1186/s12912-024-01877-1>

Houser, J. (2023). *Nursing research: Reading, using, and creating evidence* (5th ed.). Jones & Bartlett Learning.

Mainz, H., Tei, R., Andersen, K. V., Lisby, M., & Gregersen, M. (2024). Prevalence of missed nursing care and its association with work experience: A cross-sectional survey.

International Journal of Nursing Studies Advances, 6(1), 1-11.

<https://doi.org/10.1016/j.ijnsa.2024.100196>

Rooddehghan, Z., Karimi, H., Mohammadnejad, E., Sayadi, L., Haghani, S., & Karimi, R.

(2024). Missed nursing care in emergency departments: A cross-sectional descriptive

study. *BMC Emergency Medicine*, 24(1), 22. <https://doi.org/10.1186/s12873-024-00936-9>