

# Nursing time management: A survey of current practice, and evaluation of a handheld electronic tool

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# PICO-Formatted Clinical Question

- Among registered nurses working shifts in medical-surgical acute care hospital units...
- Does the use of electronic nurse-created cognitive artifacts\* ...
- Compared with paper nurse-created cognitive artifacts...
- Achieve improved patient and nursing outcomes?\*\*\*

\* This term was coined by Sharon McLane in her 2009 PhD dissertation, “Understanding Nurse Created Cognitive Artifacts.” The informal term is nurses' “brains”. It refers to devices (usually paper) nurses use to remember details about their patients and duties.

\*\* The term “improved patient outcomes” is defined and measured as fewer nursing-caused adverse events such as medication errors, falls, and pressure ulcers. “Improved nursing outcomes” regards perceptions by nurses of improved quality and reduced stress in their nursing practice, and by nursing unit management as decreased overtime expense and job turnover.

# Review of the Literature

- There is no literature to review regarding electronic time management tools for nurses because the tool discussed here is the first of its kind.
- Regarding nursing time management, there is scant research. This project proposes to investigate that, too.
- In accordance with principles of grounded theory, this project searches the literature enough to identify the gaps but not so much as to risk becoming biased; the theory should emerge from the data and not be forced by preconceptions.

# MeSH Terms for Literature Search

- Health Care Quality, Access, and Evaluation [N05]
  - Delivery of Health Care [N05.300]
    - Nurse's Practice Patterns [N05.300.581]
- Health Services Administration [N04]
  - Patient Care Management [N04.590]
    - Delivery of Health Care [N04.590.374]
    - Nurse's Practice Patterns [N04.590.688]
  - Organization and Administration [N04.452]
    - Time Management [N04.452.932]
- Computers, Handheld [L01.224.230.260.550.500]
- Psychological Phenomena and Processes [F02]
  - Psychology, Applied [F02.784]
    - Psychology, Industrial [F02.784.692]
    - Efficiency [F02.784.692.351]
    - Task Performance and Analysis [F02.784.692.746]
    - Time Management [F02.784.692.816]
  - Human Engineering [F02.784.412]
    - Data Display [F02.784.412.221]
    - Man-Machine Systems [F02.784.412.575]
    - Task Performance and Analysis [F02.784.412.846]
      - Time and Motion Studies [F02.784.412.846.707]
      - Work Simplification [F02.784.412.846.853]
    - Time Management [F02.784.412.923]

# Research Method

- Describe the processes and methods of time management used by nurses working their shifts in acute care hospitals.
- Use grounded theory (Schmidt, 2009, p. 170).
- Write in a reflective journal on my clinical rotations.
  - Record ideas, thoughts, possible emerging themes and patterns, questions for follow-up, potential categories for data coding.
  - Done. See <http://www.nursing.keller.com/#jnl>
- Moderate a focus group.
  - Formulate interview questions.
  - 6-8 people with a common interest (nursing) who do not know each other well
  - Researcher acts as facilitator.
- Conduct interviews with working nurses.
  - Ask open-ended questions.
  - Note negative case examples and conflicting information.
  - Collect “brains”.
- Generate a theory.
- Develop a practice guideline.

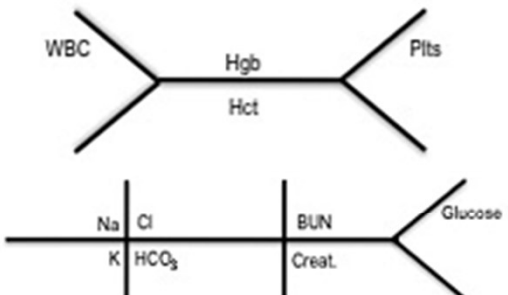
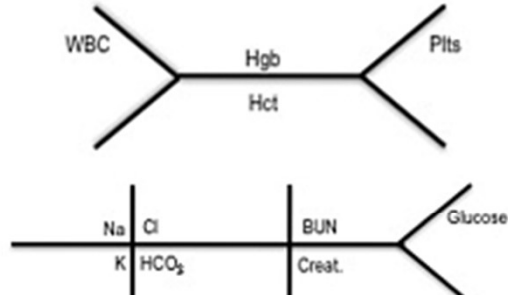
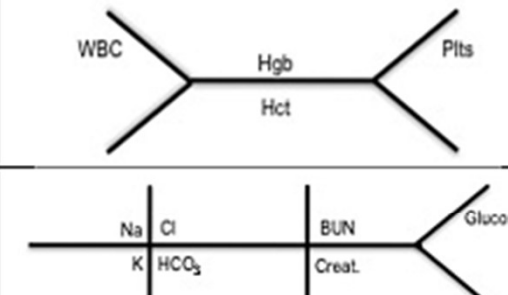
# Related Population: Student Nurses

- Conceived by a student nurse, this tool could prove beneficial to that population.
- A logical study timeframe and group would be the students (half dozen or so) on a clinical rotation.
- Working with the instructor, we could define the shifts and protocols for students to use.
- Working without the instructor, we could provide a letter for participating students to provide to their instructors, explaining goals, methods, and probability of improved performance.
- Reward to participants: an iTouch or a gift certificate.

# Interviews

- 10-20 interviews
- Audiotaped, transcribed, and analyzed
- Sample questions:
  - How do you manage your time during your shifts?
  - How do you decide what to do next?
  - How do you make sure you don't forget to do anything?
  - How do you decide what's important or what's urgent?
  - If you use a paper “brain”, how often do you consult it and why? Please provide a copy.
  - How is your performance affected by the use of the handheld electronic tool?

# Sample Brain #1

Room #/Client:	Room #/Client:	Room #/Client:
 <p>RBC Protein PT/INR Urine Dip Drug Levels Other</p> <p>ANC Albumin aPTT</p>	 <p>RBC Protein PT/INR Urine Dip Drug Levels Other</p> <p>ANC Albumin aPTT</p>	 <p>RBC Protein PT/INR Urine Dip Drug Levels Other</p> <p>ANC Albumin aPTT</p>
<p>S</p> <p>B</p> <p>Neuro:</p> <p>CV:</p> <p>Resp:</p> <p>A</p> <p>GI/GU:</p> <p>Skin:</p> <p>Musculo:</p> <p>R</p>	<p>S</p> <p>B</p> <p>Neuro:</p> <p>CV:</p> <p>Resp:</p> <p>A</p> <p>GI/GU:</p> <p>Skin:</p> <p>Musculo:</p> <p>R</p>	<p>S</p> <p>B</p> <p>Neuro:</p> <p>CV:</p> <p>Resp:</p> <p>A</p> <p>GI/GU:</p> <p>Skin:</p> <p>Musculo:</p> <p>R</p>



# Sample Brain #2

Date:

	0700 1900	0800 2000	0900 2100	1000 2200	1100 2300	1200 2400	1300 0100	1400 0200	1500 0300	1600 0400	1700 0500	1800 0600
Client/Room #												
Age      Sex												
Dx												
<b>Code Status</b>												
Client/Room #												
Age      Sex												
Dx												
<b>Code Status</b>												
Client/Room #												
Age      Sex												
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<b>Code Status</b>												

# Sample Brain #3

Date:

Client/Room #		0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800	1900
IV Access	BP													
	HR													
IVF	RR													
	Temp													
	O <sub>2</sub>													
	Pain													
	CBG													
O <sub>2</sub>	Intake													
Diet	Output													
PRN Meds:							Allergies:							
Medical Hx:														

Client/Room #		0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800	1900
IV Access	BP													
	HR													
IVF	RR													
	Temp													
	O <sub>2</sub>													
	Pain													
	CBG													
O <sub>2</sub>	Intake													
Diet	Output													
PRN Meds:							Allergies:							
Medical Hx:														

Client/Room #		0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800	1900
IV Access	BP													
	HR													
IVF	RR													
	Temp													
	O <sub>2</sub>													
	Pain													
	CBG													
O <sub>2</sub>	Intake													
Diet	Output													
PRN Meds:							Allergies:							
Medical Hx:														

# Sample Brain #4

Front of "brain"

Reverse side of "brain"

Red denotes IV medications; black notes in 900 columns are non-IV meds

Patient	800	900	1000	1100	1200	1300	1400
Row 1		NS + KCl 10 Mag 4 Mann 0.3, 3	0830 20mg 8/1 60mg 150 0440 Lys 2.75				2800 1800 +760
Row 2			KCl 40 mg Dressing	1120			
Row 3							
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36 <sup>4</sup>	60	16	110/59	99%	889
36 <sup>1</sup>	64	18	98/55	100%	
36 <sup>4</sup>	70	16	108/56	96%	

Vital signs taken at points during the shift

Other notes are of meaning only to the nurse

37 <sup>3</sup>	91	18	134/72	94	76.7
37 <sup>1</sup>	97	18	126/84	98	
37 <sup>0</sup>	81	20	112/66	98	

# Sample Brain #5

## MATERNITY BRAIN

Room 2040 Report  
 Patient initials FJ <sup>39</sup> R C/S  
 G&P 3/2 Delivery Date & Time 3/15/05 <sup>2 1/2 years ago</sup>  
 Allergies \_\_\_\_\_ Delivery Type R C/S <sup>shortened FA</sup>  
 Type & Rh OO Rubella Imm GBS ⊖ <sup>amniotic band</sup>  
 Complications \_\_\_\_\_ <sup>CD #1</sup>  
 Meds 18 Motrin <sup>300 F</sup> Procedures <sup>Last med</sup>  
Laceration/Repair <sup>LR 150 cr @ 12:15h</sup>  
 Male/Female Name \_\_\_\_\_ Breast/Bottle Report  
 Feeding times \_\_\_\_\_ <sup>Zofran</sup>  
 Mec \_\_\_\_\_ Void \_\_\_\_\_ Circ yes or no <sup>Type</sup>  
Coombs Bili level <sup>Spiral until 0400</sup>  
Type & Rh <sup>O - Coombs neg</sup>  
11A 15' <sup>nursery comb</sup>

Room 2037A Report  
 Patient initials KG <sup>28 yo</sup>  
 G&P 3/2 Delivery Date & Time 3/15/03 <sup>Hx asthma</sup>  
 Allergies Pen Delivery Type USVD <sup>CBdep.</sup>  
 Type & Rh O+ Rubella Imm GBS ⊖  
 Complications Obesity, Pre-E  
 Meds 16 Motrin <sup>17 21 Motrin</sup> Procedures \_\_\_\_\_  
 Male/Female Name \_\_\_\_\_ Breast/Bottle Report  
 Feeding times \_\_\_\_\_  
 Mec \_\_\_\_\_ Void \_\_\_\_\_ Circ \_\_\_\_\_

Room 2027 Report  
 Patient initials AT <sup>30 yo</sup>  
 G&P 1/1 Delivery Date & Time 3/14 <sup>39</sup>  
 Allergies \_\_\_\_\_ Delivery Type C/S <sup>Staples EDI</sup>  
 Type & Rh \_\_\_\_\_ Rubella \_\_\_\_\_ GBS \_\_\_\_\_ <sup>amb, & Foley</sup>  
 Complications \_\_\_\_\_ <sup>Arrest of d/d</sup>  
 Meds 18 Motrin Procedures \_\_\_\_\_ <sup>Breast w/ug</sup>  
 Male/Female Name \_\_\_\_\_ Breast/Bottle Report  
 Feeding times \_\_\_\_\_ <sup>LC</sup>  
 Mec \_\_\_\_\_ Void \_\_\_\_\_ Circ \_\_\_\_\_ <sup>latch</sup>

Room \_\_\_\_\_ Report  
 Patient initials \_\_\_\_\_  
 G&P \_\_\_\_\_ Delivery Date & Time \_\_\_\_\_  
 Allergies \_\_\_\_\_ Delivery Type \_\_\_\_\_  
 Type & Rh \_\_\_\_\_ Rubella \_\_\_\_\_ GBS \_\_\_\_\_  
 Complications \_\_\_\_\_  
 Meds \_\_\_\_\_ Procedures \_\_\_\_\_  
 Male/Female Name \_\_\_\_\_ Breast/Bottle Report  
 Feeding times \_\_\_\_\_  
 Mec \_\_\_\_\_ Void \_\_\_\_\_ Circ \_\_\_\_\_

# Sample Brain #6

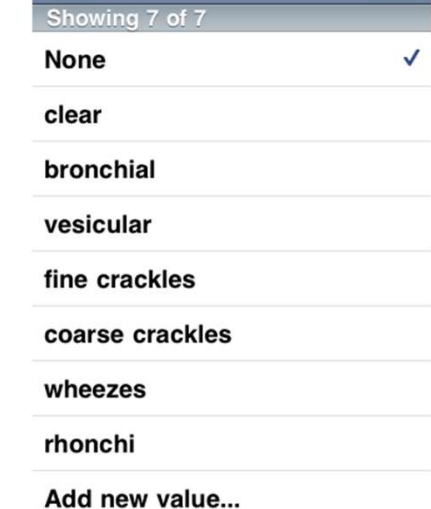
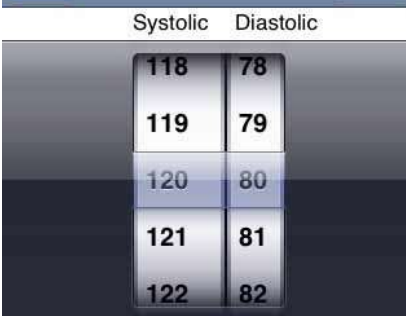
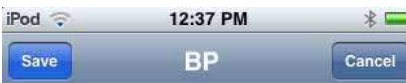
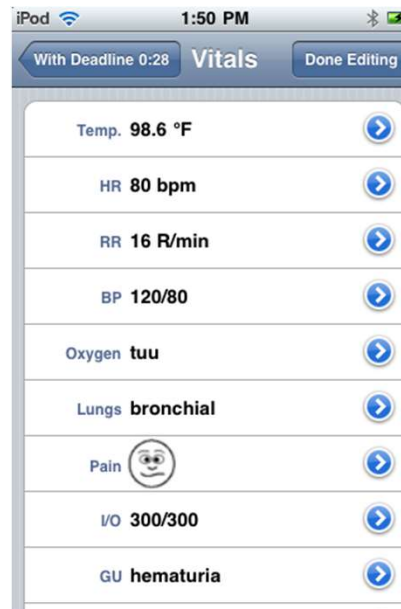
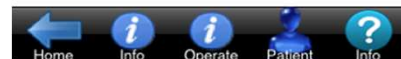
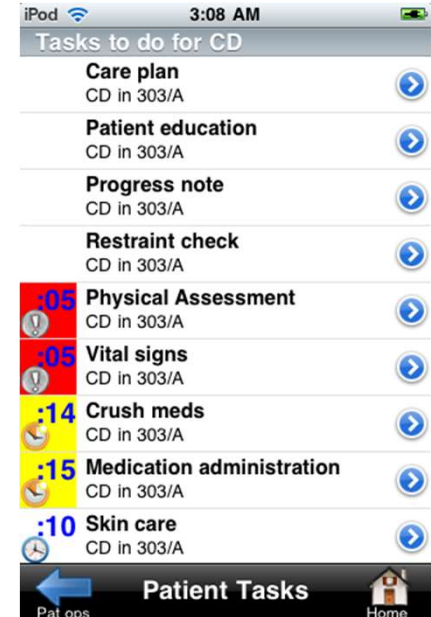
PICU RN A Shift WORKSHEET			
Hour	Interventions	Shift Change	
8	<del>premed Benadryl/Tylenol/Hydro</del> <del>Zofran</del> Foscarnet 150mls	<input type="checkbox"/> Review MD orders/kardex: Q12hr <input type="checkbox"/> All med/IV orders screened & scanned to Pharm <input type="checkbox"/> Check cont infusion rates/cosign (HA/IL/drips/maint fluids) <input type="checkbox"/> Assess IV tubing and date <input type="checkbox"/> Review/initial Care Plan <input type="checkbox"/> Check Adm Assess <input type="checkbox"/> Telephone Orders signed <input type="checkbox"/> Complete Critical Test Result Stickers and file <input type="checkbox"/> Restraint Orders/complete Flowsheet <input type="checkbox"/> Chart & Waste Narcotics <input checked="" type="checkbox"/> Complete PCS in UCare <input type="checkbox"/> Complete Charge Sheet for procedures <input type="checkbox"/> Compare MPR to Flowsheet MAR to assure all meds adm as ordered	
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11	1130 Dilxil (red port)		
12	<del>Lasix/NS</del>		
13	Skin Bx NaHCO <sub>3</sub>		
14	Ranitidine		
15			
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17	NaHCO <sub>3</sub>		<input type="checkbox"/> chlorhexidine <input type="checkbox"/> Labs for dad
18	Lasix/NS Voncorrel	A Shift Specifics <input type="checkbox"/> Assessment (Wt. q Mon) <input checked="" type="checkbox"/> <input type="checkbox"/> Oral hygiene/care q 4 hrs for intubated pts <input type="checkbox"/> Dressing assessment and change **Complete Braden Q score on Admission and daily	
19		<input type="checkbox"/> Complete Plan & Outcome	

# The Electronic Brain



- “NurseMind”
- To-do list with deadlines
- Shift-at-a-glance
- Tuned for nursing units (med-surg, ED, rehab, etc.)

# Screen Shots



# Strength of Study Design

- Weaker than that of a systematic review --
  - There is little literature to review.
  - To date, no study like this one has been done.
- Weaker than a randomized controlled double blind study –
  - This study cannot be double blinded.
  - Subjects necessarily know whether they are using an electronic or a paper "brain".
- Hence, this is categorized as a cohort study.
  - Not the best quality of evidence.
  - It's the best possible given the existing constraints.



# Implementation

- Equip subjects with app on an Apple iPod Touch
  - Nurses receive the device to use during the study and keep it upon completion
  - Nursing units may elect to equip nurses with devices
- Periodic follow up
  - Interviews
  - Questionnaires
  - Focus groups

# Evaluation

How will we measure change in quality of nursing care?

- Patient outcomes (“after” compared to “before”)
  - Falls per 1000 patient days
  - Pressure ulcers per 1000 patient days
  - Medication errors per 1000 patient days
  - Patient satisfaction surveys
  - Others to be determined
- Nurses’ subjective experience
  - Improvements in scores reported in job satisfaction surveys
  - Reductions in reported stress levels
- Nursing unit performance measures
  - Average overtime hours worked per shift
  - Job turnover rate

# Discussion (Project Summary)

- This is a research project that has not yet been done.
- It is in the refinement and proposal stage.
- Some clinical rotation journaling has been done.
- The time management tool (an iPhone app) has been under intensive development for two years and is ready for release.
- Interviews and focus groups will be planned and implemented.
- Two beta tests have been run at two different hospitals. More beta sites are being identified.
- This project is expected to be conducted during 2012-2013.
- A theory will be proposed.
- A nursing practice guideline will be developed.

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# Potential for Publication

- We hope to publish a paper regarding our results.
- *Amer J Nsg* author guidelines:  
<http://edmgr.ovid.com/ajn/accounts/ifaauth.htm>
- Propose an ANCC best practice

# Related Topic for Publication: Nursing “Presence”

- What it is, why it’s important
- How can it be measured?
  - How do we recognize it?
  - We know what it feels like when we have it.
  - But we need an objective measure.
- A strategy for conscripting participants: “snowball” e.g. CraigsList
- Consider three different groups for whom it’s beneficial: students, new grads, expert nurses
- Initial pilot study (20 nurses); later, full research study
- Power analysis: statistically, how many nurses are needed to prove improvement?
- Research questions:
  - How feasible is it for nurses to use our tool/method?
  - Do they actually use it? (questionnaire, interviews, observation, device interaction event logging on the server)
  - Analysis: is it used during the entire shift? At what time intervals?
  - Measure: satisfaction, counts of functions used, saves time? Reduced overtime?
  - Compare a unit that uses it with one that doesn’t
- Invite UCSF faculty participants (e.g. Judy Martin-Holland) to co-author.