

How do PICU nurses spend their time?

A pilot study

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Abstract

Background: The Royal College of Nursing has expressed concerns about the amount of time nurses spend completing paperwork to the detriment of direct patient contact. In a recent survey carried out by the College, nurses reported that they spent an average of 17% of their time on non-essential paperwork and clerical tasks. Although there have been some published studies of nurse-patient interactions on acute psychiatric wards, how nurses spend their time on PICUs has not been previously examined.

Aims & Objectives: To determine how nurses on a PICU divide their time between their various duties with a view to recommending ways of increasing quality time spent with patients.

Method: Five qualified nurses were each observed by the PICU's Clinical Information Assistant while they worked a long day shift. Each activity they engaged in was timed and assigned to one of seven main categories (direct patient contact, contact with relatives, friends and carers, patient-related meetings, paperwork and bureaucracy, personal development, rest time and activities not requiring a qualified nurse) and a larger number of sub-categories. The categories adopted were derived by those used by Seed et al (2010)¹. The study was conducted in a male 12-bedded independent sector PICU admitting NHS patients from all over the UK. Length of time spent on each nursing activity was entered into an SPSS database and a descriptive analysis performed. The mean time (and range) spent on each category and sub-category was calculated.

Results: Observations were carried out in January and February 2015. A total of 3,758 minutes of nursing time were observed. Participants spent most time (an average of 30.2%) on direct patient contact with 11.7% of time involving medicines administration but only a mean of 1.1% of time in formal therapy sessions with patients (just 8 minutes per shift) and

even less with relatives, friends and carers (0.4%; 3 minutes). An average of 29.7% of time was spent in meetings and discussions about patients and 22.7% in completing paperwork and administration. For 13.7% of time nurses were engaged in tasks that could have been completed by healthcare assistants or administrators, although some of this time involved direct patient contact. These activities included prompting patients to wash and dress and supervising them at meal times, domestic tasks and other non-clinical duties.

Discussion & Conclusions: It was encouraging that the largest proportion of nursing time was spent in direct patient contact but disappointing that so little time was spent in therapeutic sessions with patients. The National Minimum Standards for Psychiatric Intensive Care specify that every patient should be invited to have a 1:1 session with a member of the MDT each day². Nursing staff need to focus on spending more 1:1 therapeutic time with patients and delegate tasks that can be carried out by HCAs and supporting administrative staff. A system of 'protected time' is now being piloted to free up qualified nursing staffs' time for 1:1 sessions with their patients.

References:

1. Seed, M.S., Torkelson, D.J. and Alnatour, R. (2010) The role of the inpatient psychiatric nurse and its effect on job satisfaction. *Acta Psychiatrica Scandinavica*, 81: 46-51.
2. National Association of Psychiatric Intensive Care and Low Secure Units (2014) National Minimum Standards for Psychiatric Intensive Care in General Adult Services updated 2014. NAPICU: Glasgow, UK.