Faculty Disclosure

Faculty Name: J. Michael Leger, PhD, MBA, BSN, RN, CNL
Conflicts of Interest: None
Employer: University of Texas Medical Branch (UTMB) Health System – Galveston, Texas
Sponsorship / Commercial Support: None
GOALS AND OBJECTIVES

Session Goal
• Patient Safety: Reducing Harm

Session Objectives
• Describe how Exerting Capacity resolves the main concern of the bedside nurse in keeping patients safe
• Identify the 4-step process to Exerting Capacity
• Identify key characteristics of the 2 mindsets of Exerting Capacity
• Identify the 2 primary categories of factors that impact the RN’s ability to keeping patients safe
THE PROBLEM

Alarming number of unfavorable patient clinical outcomes continues despite patient safety initiatives (Wachter, 2004)

- 44,000 – 98,000 preventable deaths each year due to medical errors (IOM, 1999)
- 238,000 preventable deaths of hospitalized Medicare patients between 2004 – 2006 (Feng, et al., 2008)
- 180,000 lethal adverse events per year in hospitalized Medicare patients (James, n.d.)
- New research estimates preventable hospital deaths to be as high as 400,000 deaths each year (Makary & Daniel, 2016)
PURPOSE

To answer the Research Question:

- What are the perspectives of bedside RNs about patient safety in the adult acute care environment?
METHODS

Research Design

- Classical Grounded Theory (CGT) methodology
- Rigorous, inductive approach
- Hallmark: Identify the main concern of the participants who share a common experience of phenomenon
- Emergence of conceptualization to form substantive theory

Sample

- Target Population / Sampling
- 13 RNs
- 40.7 years of age
- 10 years, 5 mos. as bedside RN
- 46.2% BSN level
- 53.8% critical care / 46.2% M/S/Tele
- 46.2% < 300 beds / 53.8% > 300 beds
Main Concern: Indemnifying Duty

• Describes the nurse’s obligation to her patient
• Guarding or securing against anticipated loss or harm to a patient in the nurse’s care
RESEARCH FINDINGS:
EXERTING CAPACITY

Substantive Theory:
Exerting Capacity

- What the nurse must do to keep patients safe
- Describes the abilities necessary to accommodate & coordinate care
- Describes how nurses balance their own capacity against demands of a situation
RESEARCH FINDINGS:
4-STEP PROCESS

There is a 4-step Process to Exerting Capacity

- Information gathering
- Interpretation of the information
- Recognition of the responsibility
- Response to the recognition

SUBSTANTIVE THEORY: Exerting Capacity

4-Step Process

Main Concern: Indemnifying Duty
RESEARCH FINDINGS:
TYPOLOGY OF BEDSIDE RNS

There are 2 Mindsets of how the Bedside RN Exerts Capacity

**Me-Centric**
- At center of decisions
- Reactive
- Task-oriented

**Patient-Centric**
- Patient at center
- Anticipated awareness
- Policy vs. circumstance

SUBSTANTIVE THEORY:
Exerting Capacity

4-Step Process

2 Mindsets

Main Concern: Indemnifying Duty
RESEARCH FINDINGS:
FACTORS INFLUENCING CAPACITY

There are 2 main factors that impact Capacity

Authority
- Organization’s formal & informal leadership
- RN empowerment

Work Milieu
- Equipment & technology
- Practice patterns
- Communication

SUBSTANTIVE THEORY:
Exerting Capacity

Main Concern: Indemnifying Duty

4-Step Process

2 Mindsets

Factors that Impact
SIGNIFICANCE

- First to conceptualize patient safety from perspective of bedside RN using CGT method
- Provides a conceptual framework for further research
- Key finding: the bedside RN
STRENGTHS / LIMITATIONS

Strengths
- Inductive methodology
- Avoided bias & preconceptions
- Emergence of substantive theory

Limitations
- Number of study participants
- Limited geographic area
- Participants self-selected
IMPLICATIONS / FUTURE STUDIES

▶ More research is needed
  • Exerting Capacity
  • Instrument development

▶ Healthcare Organizations
  • Leaders’ awareness of nurses’ perspectives
  • Impact of work milieu

▶ Nursing Leaders
  • Importance of Exerting Capacity
  • 4-step process
  • Impact of own style

▶ Bedside RNs
  • Recognition of mindset
  • Compatibility with manager/unit/organization
Research Question:
What are the perspectives of bedside RNs about patient safety in the adult acute care environment?


Makary, M. & Daniel, M. (2016). Medical error – the third leading cause of death in the US. BMJ; 353;i2139. doi: http://dx.doi.org/10.1136/bmj.i2139