CARING NURSE PRACTICE IN THE INTRAPARTUM SETTING: NURSES’ PERSPECTIVES ON COMPLEXITY, RELATIONSHIPS AND SAFETY

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AIM

The aim of the study was to explore the lived experiences of nurses on their caring nurse practice of the woman in the second stage of labor within the complex health care system.

BACKGROUND: SCOPE OF THE PROBLEM

Safety, Quality and Relationships in Complex Health Care Systems

SAFETY, QUALITY AND RELATIONSHIPS

- Institute of Medicine
- Complex Adaptive Systems
- Obstetrics Keystone Project
- Relationship Based Care
- Caring Nurse Practice

SAFETY AND QUALITY ISSUES IN PERINATAL CARE

- C/Section Rates
- Elective deliveries
- Adverse outcomes
  - Mothers
  - Newborns

SAFETY AND QUALITY ISSUES IN PERINATAL CARE

- The Joint Commission Sentinel Events
  - Preventing Infant Death and Injury During Delivery (2004)
  - Preventing Maternal Death (2010)
- ACOG recommendations for elective deliveries
- National Institutes of Health VBAC Consensus Statement
- National Institute of Child Health and Human Development Fetal Monitoring Interpretation
- Quality and Safety Initiatives (Keystone)
COMPLEXITY & CHAOS

Safety, Quality and Relationships in Complex Health Care Systems

COMPLEXITY

COMPLEX ADAPTIVE SYSTEMS: PERINATAL HIGH RELIABILITY

- **Trust**, transparency, and teamwork
- Elimination of **hierarchy** in traditional physician/nurse roles and licensing.
- Teams create **safety** at the bedside (not individuals).
- **Resilience**
- All professionals conduct themselves in a **professional and respectful** manner
- Adequate numbers of registered nurses & ancillary personnel
- **Educational infrastructure**


KEYSTONE EVIDENCE

Directed pushing methods

Increased C-sections

Failure to rescue FHR's

Pitocin practices

0 Adverse outcomes mother and baby

Elective birth before 39 weeks

Keystone Evidence Center for Patient Safety & Quality

KEystone Project in Obstetrics
**Keystone Second Stage**

- Passive Descent
  - Initiation of Ferguson reflex
  - Pain with palpation
  - 3 hours indicates
  - 1 hour maturation
- Pushing technique
  - Open or closed gloved
  - More than 3 pushes per contraction
  - Sustained push of 5 seconds
- Response to FHTs
  - Recognize abnormal or indeterminate pattern
  - Evaluate false uterine contractions
  - Pushing to tolerance, ending as needed
- Management of dilution

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**Theoretical Foundations**

- Jean Watson
- Kristen Swanson
- Joanne Duffy
- Mary Kolouroutis

**Caring Nurse Practice**

- Safety, Quality and Relationships in Complex Health Care Systems

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**Relationship Based Care: Culture of Caring**

- “Reigniting the Spirit of Caring”
- Creative Care Consultants
  - Increases caring behaviors
  - Improves nurse and patient satisfaction
  - Cost effective
  - Improves care environment

The Phenomena

- Caring Nurse Practice
- Relationship Based Care
- Obstetrics Keystone Project
- Second Stage Labor
- Complex Adaptive System

The Research Questions

For the woman and her family in the second stage of labor:

- How do nurses describe their nursing care?
- How do nurses perceive the complexity of health care?
- How do nurses perceive the impact of health care environment, system, or personnel in their provision of nursing care?
- How do nurses perceive the impact of hospital initiatives including the Obstetric Keystone Project and Relationship Based Care in their provision of nursing care?
- What other factors do nurses identify as impacting their caring practices?

The Setting

1200 Births per Year

Complex Adaptive System + Obstetrics Keystone + Relationship Based Care

The Study

- Method
- Design
- Participants
- Ethical Considerations
- Data Collection
  - Demographics/education/work history
  - Structured Interviews

Data Analysis

- **Step One**: Organizing and preparing the data by transcribing the interviews and typing the notes from note takers.
- **Step Two**: General read through to get a sense for the data considering the ideas and tone of participant remarks. Notes regarding these ideas were placed in the margin of this document.
- **Step Three**: Transcripts were evaluated line by line, with a detailed coding process of placing data into sixteen categories.
- **Step Four**: Coded transcripts were reviewed further and five major themes were identified.
- **Step Five**: Review of transcripts to identify those representative terms, phrases, and passages that best represented the five themes.
- **Step Six**: Data meanings were interpreted within the framework of the semi structured interview questions.

Creswell, 2003
RIGOR

- Digital audio recordings
- 2 note takers at each session
- Experienced transcriptionist
- Transcripts and coding scheme cross-checked by methods expert

THE PARTICIPANTS

- Age (years)
  Average 44.75
  Range 30-60
- Years as Registered Nurse
  Average 17.25
  Range 4-40
- Years as a Labor & Delivery Nurse
  Average 11.38
  Range 1-33
- Years at CHMC
  Average 12.38
  Range 1-42
- 75% of participants practiced at another labor and delivery unit an average of 5.04 years

- Education
  Diploma 8% (n=1)
  Associate’s 46% (n=6)
  Bachelor’s 30% (n=4)
  Master’s 15% (n=2)
- Shift
  Day 46% (n=6)
  Night 54% (n=7)
- Hours
  Full time 69% (n=9)
  Part time 15% (n=2)
  Contingent 15% (n=2)

THEMES

- Caring Nurse Practice
- Complexity
- Interactions
- Documentation
- Letting Nature

Caring Nurse Practice

- Role
- Physical care
- Advocacy
- Patient education
- Relationship
**Caring Nurse Practice**

- Advocacy
- Education
- Caring
- Nurturing
- Technology

**Nurse-Patient Relationship**

**Optimal Patient Outcomes**

**Complexity**

- Labor
- Multitasking
- Patient acuity
- Organizational challenges
- Obstetric Keystone Project
- Relationship Based Care

**Interactions**

**Contributory**

- Teamwork
- Nurses
- Security
- Anesthesia
- Respiratory
- Neonatology
- Obstetricians

**Disruptive**

- Nurses
- Laboratory
- Physicians

**Letting Nature**

- Process of pushing
- Support by nurses
- Behaviors of women
- Exhaustion

**Essence**

*Caring Nurse Practice* is provision of physical care, advocacy and education, encompassing a *relationship* with the patient with respect for the *nature* of second stage labor and a particular emphasis on the benefits of *teamwork*.

**Discussion**
**Complexity**

**Keystone Standards**

**Relationship Based Care**

**Charting**

**Second Stage of Labor**

**Safe Birth**

**Study Limitations**

- Self selected participants
- Small number: 13 of 40 nurses
- Setting: One hospital
- Variation in education and experience levels
- Phenomenology subject to interpretation

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**Conclusion**

**Implications**

- Caring Nurse Practice
- Practice Setting
- Documentation
- Childbirth Education
- Policy

**Outcomes**

- Keystone: Continue project & disseminate findings
- Relationship Based Care: Sustain gains, educate new employees, disseminate findings
- Electronic Health Record: Creation of an E-Cardex, support for transition to bedside report
- Childbirth education now “on the road”
- Hospital has begun to offer midwifery care
REFERENCES


QUESTIONS?

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References

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