

Abstract of parallel session: S.2

Title: Patient-Centered Care, Nurse Work Environment and Rationing of Nursing Care in Swiss Acute Care Hospitals

Presenting Author(s): Stefanie Bachnick¹

Institutes: 1) Nursing Science, University of Basel, Basel, Switzerland
2) Claudiana College of Health-Care Professions, Bolzano, Italy
3) School of Nursing, Virginia Commonwealth University, Richmond, U.S.
4) Inselspital Bern University Hospital, Nursing Research Unit, Bern, Switzerland

Authors (s): Stefanie Bachnick¹, Dietmar Ausserhofer², Marianne Baernholdt³, Michael Simon^{1,4}, On behalf of the Match^{RN} Study Group¹

Abstract no: 13

Presentation language: English

Abstract*Background*

Patient-centered-care (PCC) is a key element of high-quality healthcare and associated with improved patient-reported, clinical and economic outcomes. While studies have shown the influence of hospital-level characteristics on patients' perceptions regarding PCC, little is known on its association on unit-level characteristics. The aim of this study is to describe PCC in Swiss hospitals and to explore associations with hospital and unit characteristics.

Methods

We included 2073 patients and 1810 registered nurses from 123 units of 23 Swiss hospitals. Patients' perceptions of PCC were assessed with questionnaires using 4 items from the Generic Short Patient Experiences Questionnaire. Nurses completed questionnaires assessing perceived staffing and resource adequacy, adjusted staffing, leadership ability and level of rationing of care. Hospital-level data (size, ownership status, type) were provided by the Swiss Federal Statistical Office. We applied a Generalized Linear Mixed Models for analysis.

Results

Patients reported high levels of PCC, e.g., 90% easily understood nurses and 70% felt involved in treatment and care decisions. Higher staffing and resource adequacy was associated with higher levels of PCC, e.g., sufficient information (beta 0.638 [95%-CI: 0.30 - 0.98]). Higher leadership ratings were associated with sufficient information (beta 0.403 [95%-CI: 0.03 - 0.77]) and adapted treatment and care (beta 0.462 [95%-CI: 0.04 - 0.88]). Furthermore, higher levels of rationing of care were associated with lower levels of PCC, e.g., adapted treatment and care (beta -0.912 [95%-CI: -1.50 - -0.33]). Adjusted staffing levels and hospital characteristics were not associated with PCC.

Conclusion

Swiss hospitals have high levels of PCC, but with the potential for improvement in involving patients to contribute to their treatment and care decisions. To improve PCC, the nurse work environment and the level of rationing of care should be taken into account.