

RATIONING OF NURSING CARE AND ITS RELATIONSHIP TO WORK-RELATED CHARACTERISTICS OF STAFF NURSES IN A TERTIARY SPECIALTY HOSPITAL



National Kidney and Transplant Institute
Quality Assurance and Nursing Research Unit

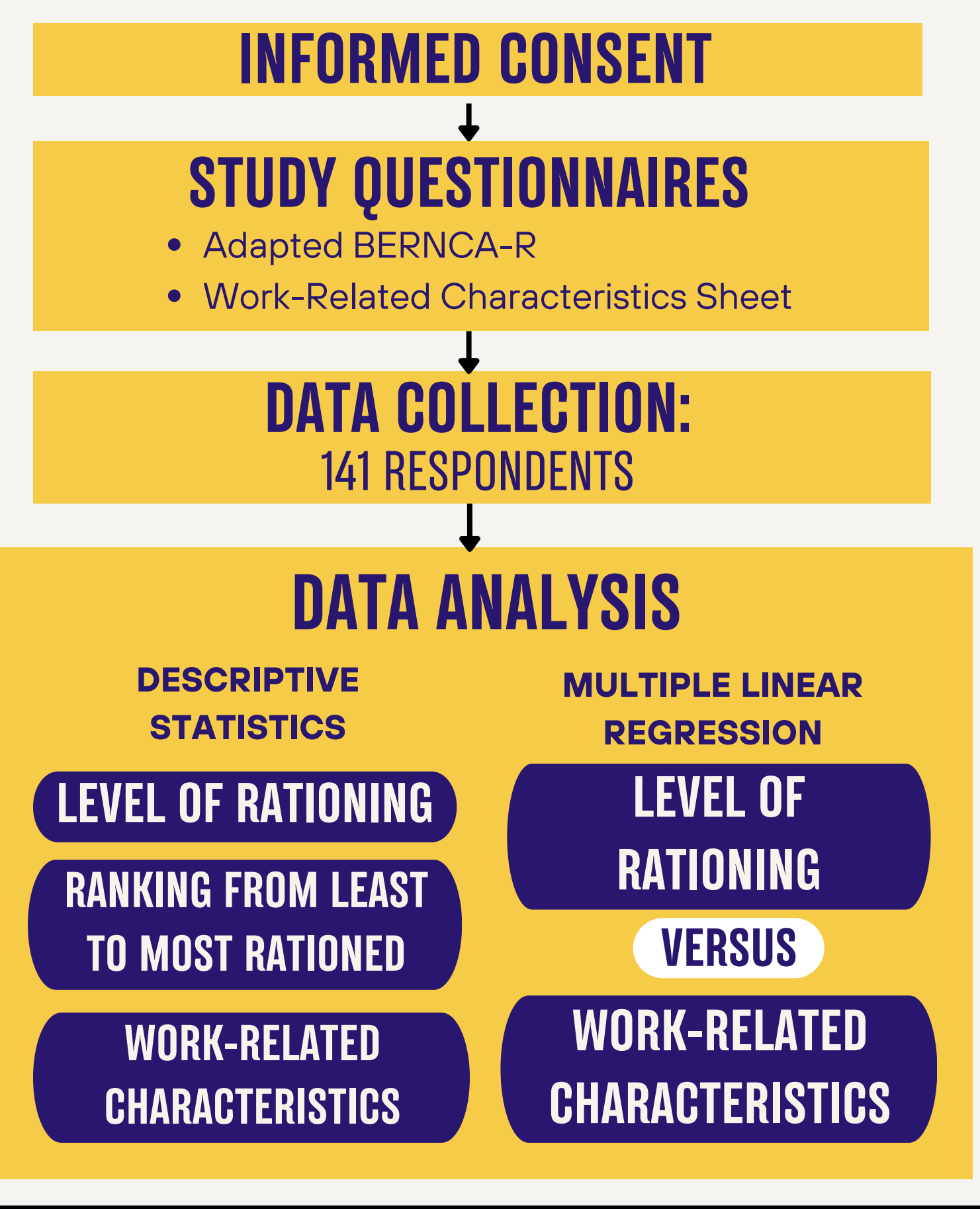
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INTRODUCTION

Rationing of Nursing Care (RONC), introduced by Maria Schubert in 2008, refers to the withholding or omission of necessary nursing interventions due to lack of staff, skills, or time (Schubert et al., 2008). A large scale study have shown that up to 86% of nurses report leaving at least one (1) care activity undone during their last shift, with contributing factors including poor staffing, time constraints, inadequate staff utilization, unclear delegation, and not completing care out of habit or denial that an aspect of care is missed (Ball et al., 2014; Kalisch, 2006). This study aimed to determine the relationship between the level of rationing of nursing care and work-related characteristics of nurses in a tertiary specialty hospital. Specifically, it sought to classify nurses' work-related characteristics, describe the level of RONC, and explore the relationship between these factors. Findings are expected to enhance nurses' understanding of RONC, improve quality of patient care, guide nursing administrators in addressing staffing and workflow issues, and contribute valuable data to inform national healthcare policy improvements.

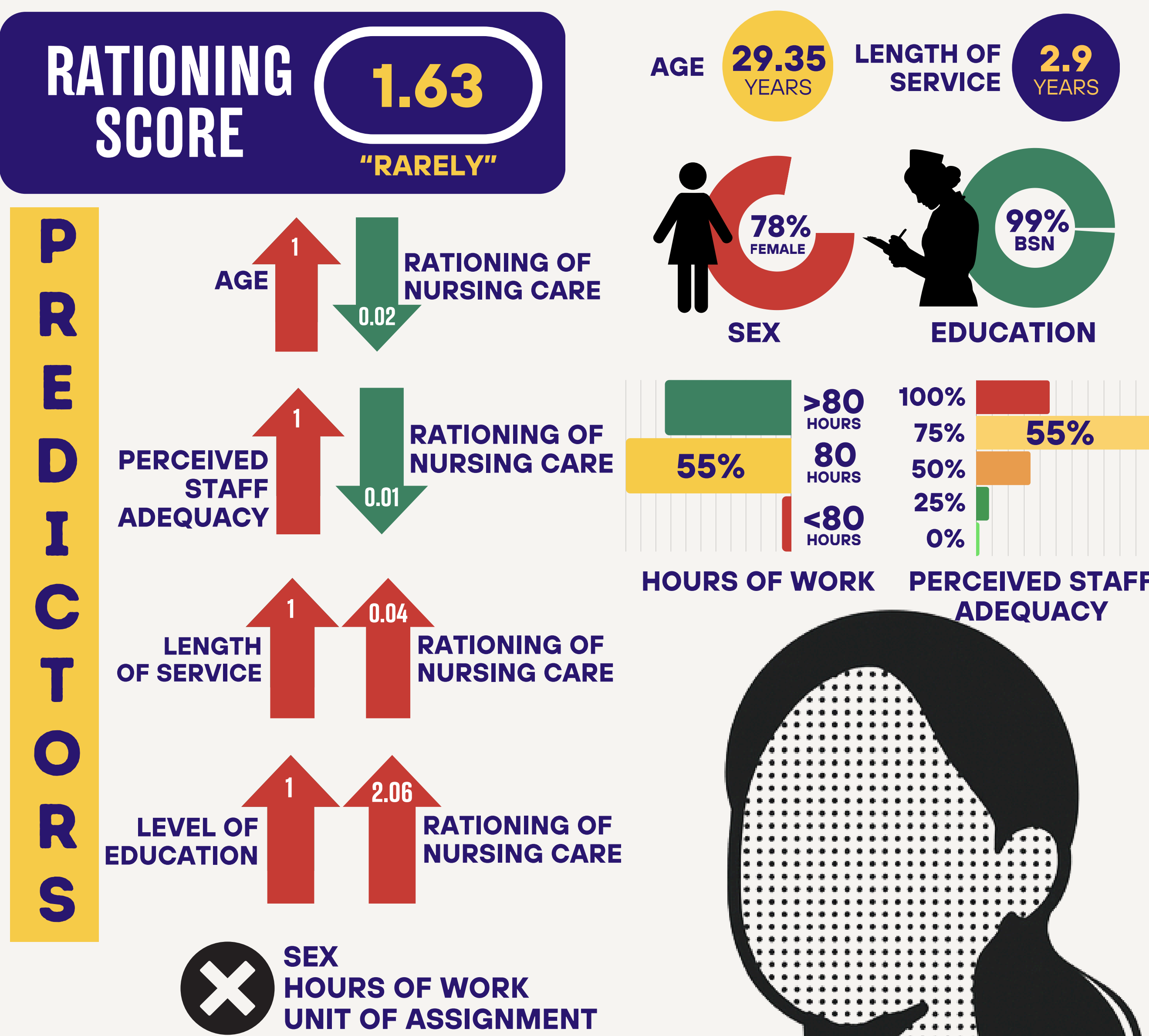
METHODOLOGY

This is a cross-sectional descriptive, correlational study, utilizing proportional stratified random sampling with a total of 139 target nurse respondents. The process done to collect and analyze data is shown in the flow chart below.



- Rationing of Nursing Care occurred 'rarely', indicating minimal but existing lapses in care delivery.
- Nursing tasks involving communication, and psychosocial support were most frequently rationed, while those related to discharge, nutritional support, intake and output monitoring, and encoding were least rationed, likely due to their therapeutic or time-limited nature.
- Significant predictors of RONC include age, length of service, education and perceived staff adequacy, suggesting that both personal and organizational factors influence rationing.

RESULTS AND DISCUSSION



CONCLUSION AND RECOMMENDATIONS

- PRACTICE:** Follow guidelines on delegation of tasks.
- EDUCATION & TRAINING:** Implement programs focused on communication, psychosocial care & delegation skills; Perform competency checks.
- POLICY & MANAGEMENT:** Staffing should balance experience across units, Establish clear policies on delegation of tasks
- RESEARCH:** Include other units; Examine other predictors of rationing such as job satisfaction, fatigue, & patient safety; Explore qualitative methods to understand rationing.

REFERENCES

