Abstract 055
Category: Research on nursing diagnosis

TITLE: Masked nursing diagnoses in gerontological care
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Introduction:
In a rehabilitative gerontological care setting, routinely generated statistics showed that the number of nursing diagnoses per patient had increased by 30%, case weight index increased by 25%, and situations coded “red” increased by 20% over five years. Moreover, 80% showed particular individual needs compared to 51% five years before. From a preliminary study, it was suggested that functional deficits such as self care might mask individual needs (e.g., anxiety, confusion, pain). This in turn could lead to deficient care and compromise patient outcomes.

Aims:
1. to identify possibly masked, non-functional nursing diagnoses
2. to identify prevalent non-functional nursing diagnoses

Methods:
The comprehensive geriatric assessment (CGA, Ellis et al., 2017; physical examination of the Patients, as well as the diagnostic process (Lunney, 2007), was performed in 274 patients by five master’s prepared clinical nurse specialists (CNS) in gerontological care. Information was then compared to the documented information in paper charts and electronic patient records, respectively, routinely recorded by registered nurses.

Findings:
From the pilot study, the rate of functional nursing diagnoses (ND) per patient was 9.0, whilst individual NDs were rated at 1.9 ND / patient. In the main study, 3.2 ND/patient which had not yet been detected were identified. Prevalent NDs were ineffective health management (00078), acute pain (00132), impaired skin integrity (00046), chronic confusion (00129), acute confusion (00128), and others.

Conclusions:
Functional focusing may mask individual needs. This could lead to compromised patient outcomes, particularly with regard to self-management, cognitive impairments, or particular risks.

References: