

# Missed nursing care as related

# to the types of ethical climate in public hospitals

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#### Introduction

Missed nursing care is defined as "any aspect of required patient care that is omitted (either in part or in whole) or delayed", (Kalisch et al. 2009, p. 1509), it can occur at any stage of the nursing process and it is influenced by factors in the care environment such as the allocation of resources (material and labor), relationships and communication, that affect nurses' internal processes (e.g. values, beliefs, collective team norms) and guide them in deciding which nursing activity should be completed, should be missed, or should be delayed (Kalisch et al. 2009).

Ethical climate in hospitals reflects the collective behavior of health care employees, acts as a reference of behavior when nurses face ethical issues and has a great impact on their decision-making process and on the quality of patient care. Victor and Cullen (1987) defined ethical climate as "the shared perceptions of what is ethically correct behavior and how ethical issues should be handled in organizations". Five types appear frequently in healthcare organizations which are the Caring, the Instrumental, the Rules, the Law and Codes and the Independence.

Research on the relationship of the types of ethical climate with missed nursing care is limited. Since the nurses' practice environment has been linked to missed nursing care and having in mind that the ethical climate is actually a dimension of the whole working environment, as well as, the results of a previous study (Vryonides et al. 2016) that had examined this relationship in cancer care units (only), the current study further explores this relationship.

The purpose of this study was to explore the prevailing types of the ethical climate in relation to missed nursing care, as perceived by nurses in public hospitals in Cyprus.

More specifically, the research objectives were:

- To find out the prevailing ethical climate types that are identified by nurses in these hospitals.
- To explore the relationship (if any) between the identified types of ethical climate and the reported by nurses level of missed nursing care

#### Methods

Research design: Descriptive correlational study was employed on a sample of 782 nurses.

Data collection and analysis: Data were collected using the Ethical Climate Questionnaire and the MISSCARE survey (part A) and analyzed with descriptive statistics and Pearson's correlation.

Participants and research context: All nurses working with adult in-patients in medical and surgical units of all public hospitals of the republic of Cyprus were invited to participate.

## Results

**Response** rate was 81.5%. Most of the respondents were females, younger in age, highly educated and they have more than five years clinical experience (see Graph 1). The reported overall missed nursing care (range:1-5) was moderate M=2.51 (SD=0.45), (Overall percentage of missed care: 49.8%).

(n=782)

**<25** 

**25 -34** 

35-44

**45-54** 

**55**+

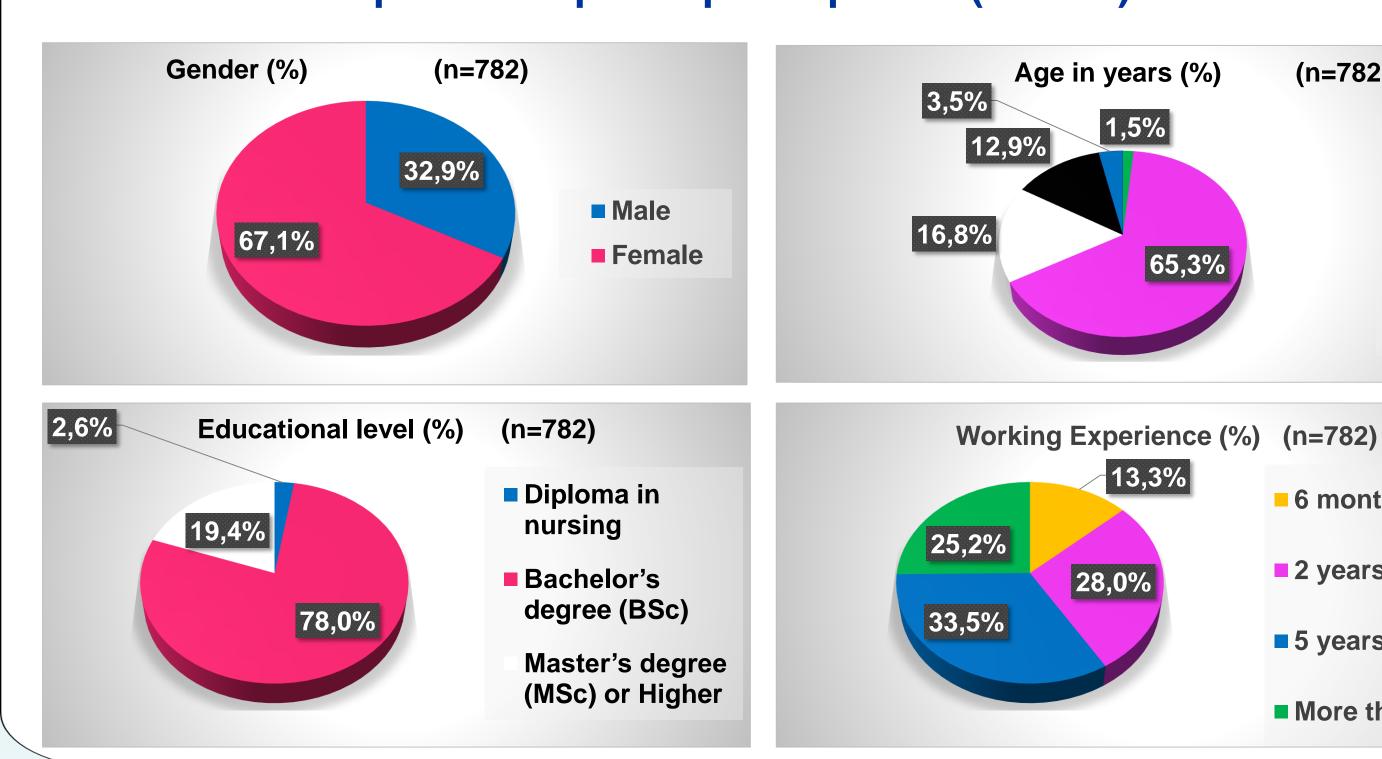
6 months to 2 years

2 years to 5 years

■ 5 years to 10 years

■ More than 10 years

**Graph 1: The participants profile (n= 782)** 



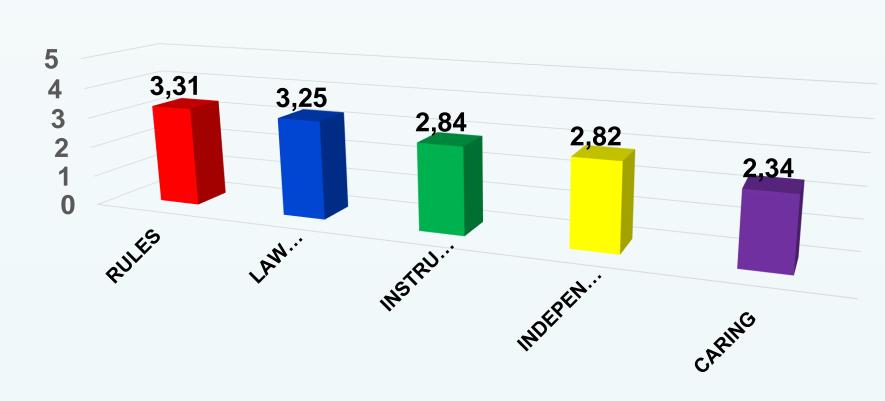
## Results (continue...)

Five types of ethical climate (Range: 0-5) have been identified and each one of them was found to be significantly related (positively or negatively) with the levels of missed nursing care (see graph 2 and table below)

Higher level of Instrumental and Independence types of ethical climate are significantly (p<0.001) associated with higher levels of overall missed care (positive correlations).

On the other hand higher level of caring, rules and law and code type are significantly (p<0.001) associated with lower levels of overall missed care (negative correlations).

**Graph 2 : The prevailing types of ethical climate** 



	TYPE OF ETHICAL CLIMATE				
	Instrumental	Independence	Caring	Rules	Law and code
MISSED NURSING CARE	0.642*	0.610*	- 0.596*	- 0.548*	- 0.589*

Pearson Correlation coefficient, is significant at p<0.001

#### Conclusions

When nurses perceive the ethical climate in their working place as one that focus in egoistic tendencies (Instrumental), they also perceive that more nursing care activities are missed. Care activities are also missed more in ethical climates guided by personal believes, personal morality and individual sense of what action is right and what is wrong (Independence).

On the other hand, when nurses perceived that the ethical climate in their working organization is guided by benevolent and utilitarian ideals (Caring), then they report less care omissions. The same exist when the ethical climate is perceived as one that has a strong focus in the compliance and respect of rules, ethical principles, laws and codes of ethical conduct (the Rules and the Law & code climates)

It is possible that by reducing the influence of Instrumental and Independence types of ethical climate and by fostering Caring, Rules and Law and code types, one can assist in the efforts to decrease missed nursing. However, further research is needed in order to have an increased understanding of this relationship.

#### **Bibliography**

- 1. Kalisch, B.J., Landstrom, G.L., Hinshaw, A.S., 2009. Missed nursing care: a concept analysis. J. Adv. Nurs. 65, 1509–17. doi:10.1111/j.1365-2648.2009.05027.x
- 2. Victor, B. & Cullen, J.B., 1987. A theory and measure of ethical climate in organizations. In W. C. Fredrick & L. Preston, eds. Business ethics: research issues and empirical studies. Bingley, UK: Emerald Group Publishing Limited, pp. 77–98.
- 3. Vryonides, S., Papastavrou, E., Charalambous, A., Andreou, P. Eleftheriou, C. & Merkouris, A. 2016. Ethical climate and missed nursing care in cancer care units. Nursing Ethics. Available at: http://nej.sagepub.com/cgi/doi/10.1177/0969733016664979

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