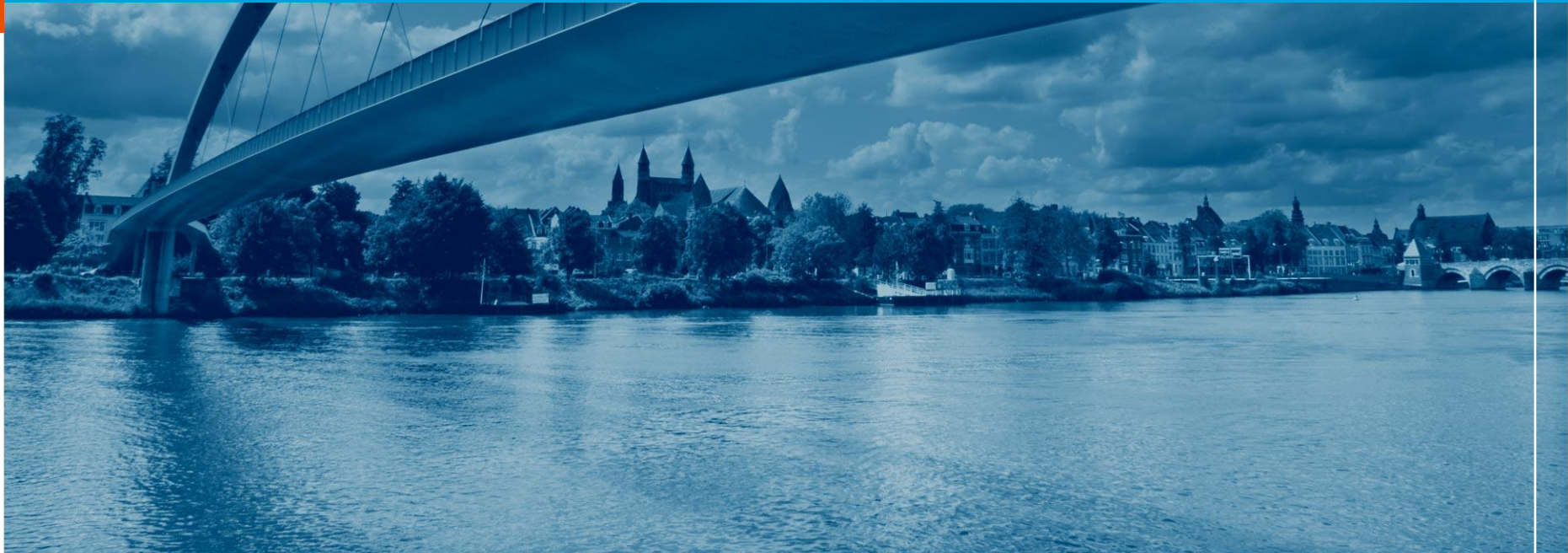




Care for older people : can registered nurses make the difference?

Prof. Dr. Jan Hamers

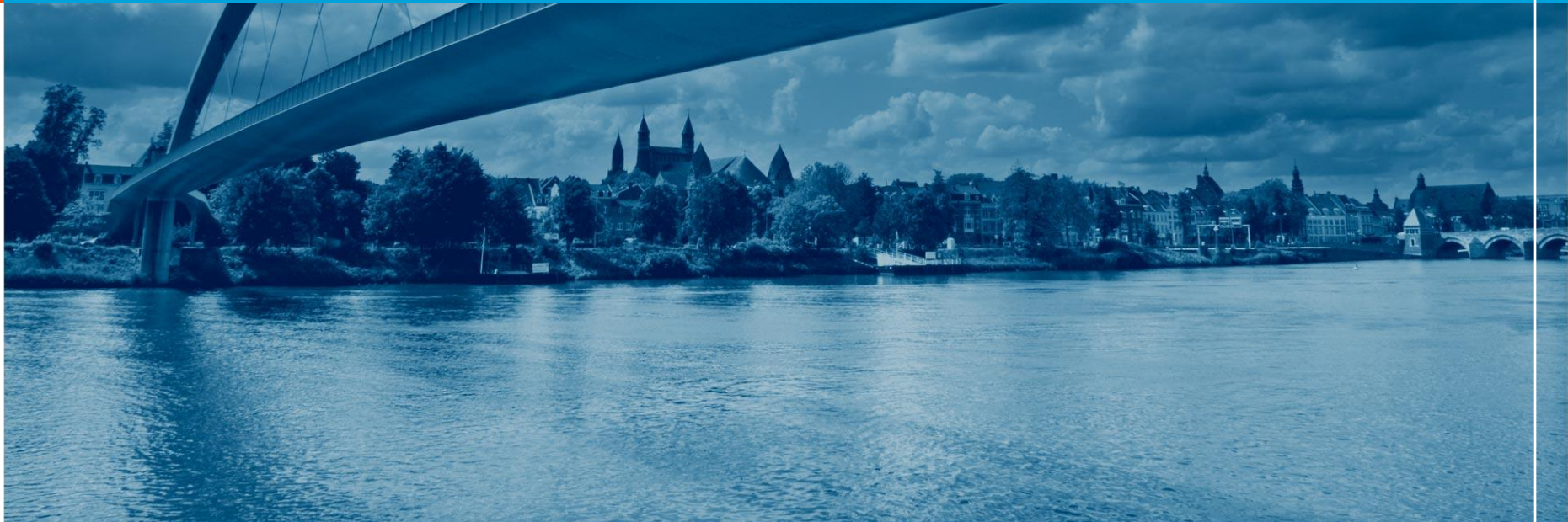


YES!





Thank you for your attention



What have I learned in Rotterdam?





Language

- Proudness and dignity

- Proudness or Pride?
 - Pride and dignity



Language



Caroline Smeets
@SmeetsCaroline



 **Volgen**

Bij [#eurnursing](#) drie verschillende benamingen gehoord voor [#wijkverpleegkundige](#): home care nurse, community nurse & district nurse.



We should speak the same language

- Polypharmacy
- Function focused care
- Physical activity
- Physical restraints



What have I learned?

- Importance of good problem analyses and clinical reasoning
- It is about small things that count
 - Essentials in nursing care / basic care



What have I learned?

- Need for scientific research

- Importance to use evidence
 - A lot of knowledge is available; we 'only' have to use it
 - Implementation is still a major challenge



What have I learned?

- Nursing leadership is badly needed

- Nurses can make the difference in quality of care
 - Nursing homes?
 - Quality framework in the Netherlands



Main question

- Is there scientific evidence for an association between staffing and quality of care in nursing homes?



➤ Scientific evidence

- Papers published *peer reviewed* scientific journals
- Published abstracts of recent completed Dutch studies
 - Comparability is limited
 - Nursing assistants, Nursing aides, Registered nurses

➤ Staffing in direct care

- Fte ratio
- Educational level

Methods

- Literature review
 - Pubmed, cinahl, google scholar
 - Reference tracking

- 183 scientific papers
 - Including 5 (of 13) reviews
 - Last 20 years (until 2-2016)

Measures

- Staffing
 - Number of staff in direct care related to number of residents; in hours or Fte

- Quality of care
 - Outcome indicators

- Quality of life
 - Self-reported QoL

Results general

- Most studies in USA
- Data from large data bases
 - Ill. Oscar data; data entry 1x per 15 months
 - Not designed for research purposes
- Almost all studies are cross-sectional
 - Associations, no causality
- 1 review longitudinal studies
 - Longitudinal design: repeated measures, causality

Results staffing

➤ No evidence

for association between number of staff and quality of care, quality of life and satisfaction

Result educational level

➤ No clear evidence

for association more nursing aids, nursing assistants or registered nurses and quality of care and quality of life

Nurses on the Move (2015)

- No association staffing levels and quality of care
 - Study including 55 NH wards
- Value Bachelor RN could not be examined
 - Study including 282 NH wards

Higher staffing levels not associated with better quality of care

- In contrast with general opinions
- Increasing complexity, changing demands and introduction of technology
- Different competencies and skill-mix
- Bachelor and master educated nursing staff should be added to the teams

What I've learned

- A lot!
- Many challenges ahead of us
- Inspired by the many contributions
- Care for older persons is 'alive and kicking an sexy'



Let's go back to work, and let us make the difference!





Thank you for your attention

