

POSTER PRESENTATION

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Quality of patient care in critical care units: in relation to nurse/patient ratio

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From ESICM LIVES 2015 Berlin, Germany. 3-7 October 2015

Introduction

Intensive care is one of the most resource-intensive forms of medical care due to severely ill patients [1].

Objectives

To measure optimal medical and nursing-related result usually used indicators is mortality, complications in intensive care, quality of life and functional status after intensive care. Among these indicators, only the frequency of VAP and multi-resistant bacteria that coincides with the Institute of Medicine (2001) scientifically approved nursing indicators for person-centered care. However none of these indicators is collected in the Swedish registry(SIR) therefore time on noninvasive and invasive ventilator treatment is collected to describe how indicators are a useful measure of Swedish intensive care from the nursing perspective is measured.

Methods

This is a retrospective registry study includes a survey of critical care of registry data (all patients> 15 years) receiving care in six general Level I critical care units during 2010-2014. Data of nurse/patient ratio is collected from each unit. The data is analyzed by descriptive and comparative statistical methods.

Results

Preliminary result shows an increase in critical care admissions from 7331 in 2011 to 7653 in the year 2014 throughout six university hospitals in Sweden. There was a large range in admissions between hospitals n= 667-2313. The result showed that 83% (5 out of 6) of the hospitals had a specialized nurse/patient ratio of 0.5-0.75 and one hospital had a 1:1 ratio. The hospitals care for adult patients between 17-100 years of age with 40% female and

60 percent are male patients with 30 days mortality of 18%. Complications during critical care was measured by readmission and unplanned reintubation and showed that unplanned reintubation was rare 2-8% with the highest rate at the hospital with the lowest rate of patients receiving invasive ventilation. Readmissions were found in 2-5% of all admissions, no correlation was found.

Conclusions

There is an increase in critical care admissions throughout Sweden between the years 2010-2014. Preliminary results show differences in nurse/patient ratios in general critical care units throughout Sweden but data to measure optimal nurse/patient ratio is lacking. Further analysis is needed.

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Published: 1 October 2015

References

- Soini K, Stiernström H: Organisation av en intensivvårdsavdelning. In Intensivvård. Stockholm: Liber;Larsson, A., Rubertsson, S. 2005:13-17.
- 2. Crossing the quality chasm: a new health system for the 21st century.

 Institute of medicine Washington DC: National Academy Press; 2001.
- Aiken L, Sloane DM, Bruyneel L, Van den Heeke K, Griffiths P, Busse R, et al: Nurse staffing and education and hospital mortality in nine European countries: a retrospective observational study. Lancet 2014, 383(9931):1824-1830.
- McGahan M, Kucharski G, Coyer F, et al: Nursing staffing levels and the incidence of mortality and morbidity in the adult intensive care unit: a literature review. Aust Crit Care 2012, 25(2):64-77.

doi:10.1186/2197-425X-3-S1-A479

Cite this article as: Falk and Wallin: Quality of patient care in critical care units: in relation to nurse/patient ratio. Intensive Care Medicine Experimental 2015 3(Suppl 1):A479.

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