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Identifying nurses interventions in behavioral, physiological, safety, and family domains: The use of electronic standardized nursing terminology for oncology care in an acute setting

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Introduction: Traditionally, nursing managers in clinics monitor quality indicators from paper report. It suggests that nurses obtain a clear picture of how nurse's interventions via viewing the frequencies of nursing problems, nursing interventions, and nursing-sensitive patients outcomes and their 1 to 5 outcome scores linked to nurses activities in the Electronic Standardized Nursing Terminology (ESNT).

Purpose: The study aimed to identifying nurses activities in classified domains and rationale the activities for a better understanding of patient outcomes documented by nurses using ESNT for oncology care.

Methods: In this descriptive retrospective study, we included patients with cancer admitted in 4 oncology units in a tertiary hospital over 7 months. Demographics, diagnoses, interventions, and outcomes using a 5-point Likert scale were retrieved from medical records and the nursing documentation system.

Results: We found 100 nursing interventions documented in the study sample (2,237). Four domains are identified: Behavioral, physiological, safety, and family. Pain management, in the domain of physiologic is the most common intervention in the study. In the top ten interventions, there are 4 interventions in the domain of safety and 5 in the domain of physiologic.

Conclusions: Findings suggest problems, interventions, outcomes and change scores recognized by nurses for patient care settings with the use of ESNT which provides a valuable evaluation of patient care for nurses.

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Individual and family determinants of elder care: Evidence from China health and retirement longitudinal study (CHARLS)

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This paper aims to explain how individual characteristics and family context determine middle-aged Chinese adults giving care to elder parents. While demographic transition is putting a strain on China's elder care system, informal care provided by adult children remains an important form of care. Intergenerational transfer literature with "caregiver selection" approach is constrained by several presumptions, and empirical study on China remains rare, partly due to data limitation. With a nation-wide sample from two waves China Health and Retirement Longitudinal Study (CHARS) in 2011 and 2013, this paper uses multilevel models to explore within-family and between-family determinants in adult children's care-giving behavior. Time transfer propensity is measured as probability of giving care, and the relationship between different types of care is discussed. Results show that child's proximity, competing roles, complementary care resource and family composition influence adult children's caregiving. The finding is in accordance with China's social context. Understanding of such mechanism helps to inform China's future eldercare policy formulation that meets the needs of individuals and families with different traits.

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