DELIVERY DECISIONS INITIATIVE

NURSE IMPACT

BRIEF SUMMARY OF SURVEY RESULTS

SPRING 2022
Nurse Impact is a series of projects that seeks to strengthen and standardize nursing practice to improve the quality and equity of maternity care.

This report summarizes the key results from the National Labor and Delivery (L&D) Nurse Survey. The survey sought to better understand how nurses promote physiologic birth and reduce low-risk cesarean delivery.

From July to August 2020, 1,021 registered nurses working on labor and delivery units in 44 states + DC completed the survey via a web-based instrument. The results reflect the views of nurses practicing during the COVID-19 pandemic.

This work was funded by the Risk Management Foundation of the Harvard Medical Institutions Incorporated within the Controlled Risk Insurance Company Ltd.
The majority of nurses surveyed worked on L&D units in urban or suburban settings, in hospitals with annual birth volumes of 1,000 or more, and with the capacity to provide Level III (NICU) or higher neonatal care.

Nearly half (48%) of nurses surveyed were employed by a "Magnet" hospital, a designation of nursing excellence issued by the American Nurse Credentialing Center (ANCC).
The majority of respondents were non-Hispanic White, female, full-time staff nurses with at least a Bachelor of Science in Nursing degree. Nearly 16% of respondents held advanced certification in nurse-midwifery, and 29% completed training in Spinning Babies®.

Respondents with over 15 years of experience as a registered nurse (RN) on a labor and delivery unit made up 30% of the sample. In comparison, 36% of the sample had less than or equal to five years of experience as an RN on a labor and delivery unit.

Note: Spinning Babies® is a labor support approach based on easing the baby's rotation to promote uncomplicated vaginal delivery.
NURSES WANT TO KNOW THEIR NUMBERS

Feedback to physicians about the cesarean birth rates of the women under their care is a common, evidence-based strategy to initiate practice changes aimed at safely improving birth outcomes. There is the potential to implement the same strategy to optimize nursing practice.

**OPPORTUNITY:** Data from our survey suggests a high level of perceived effectiveness and interest in using data to reduce low-risk cesarean rates among nurses.

- **87%** Most (87%) of the nurses surveyed agree that the internal sharing of provider cesarean section rates can help reduce overall low-risk cesarean birth rates.
- **66%** The majority (66%) of the nurses surveyed are interested in (15% uncertain) receiving regular reports on their own low-risk cesarean birth rate.

**US CESAREAN BIRTH RATES**

Data sourced from various CDC vital statistics reports 1970-1990 and cesareanrates.org
NURSING CARE DURING COVID-19

The data was collected July-August 2020 during the COVID-19 pandemic. Data from our survey suggest the pandemic had a significant effect on nurses' provision of labor support.

Nearly a quarter (23%) of nurses reported that the provision of professional labor support in the past month had been frequently or always missed (delayed, unfinished, or omitted) during labor and birth by the nursing staff.

**OPPORTUNITY:** Policies and practices that can facilitate L&D nurses' ability to safely and securely remain at the bedside, providing high-touch, hands-on labor support during times of disruption, are needed. Measurement of missed nursing care is a promising approach to investigating the quality and safety of nursing care.

"We honestly aren't spending as much time at the bedside due to the PPE shortage and having to gown and de-gown each time"

“I think patient care has suffered because most nurses who would normally stay at the bedside are now leaving their patients more frequently”

- Anonymous Nurse Respondents

Our Survey Found

Nearly half of nurse respondents (48%) agreed that too many cesarean births are performed on their unit.

The vast majority of respondents (91%) agreed that providing more direct (in room) nursing support to patients is a best practice to reduce cesarean births.

The majority of respondents (67%) believed that nurses are encouraged and supported to spend the majority of their time in the room with the patient on their unit.

Opportunity:

Promote nursing knowledge of hospital performance metrics, including the low-risk cesarean birth rate.

Optimize organizational support for nurses that enables them to spend most of their time at the bedside providing care and labor support.
Looking Forward
WITH INTENTION

THE FUTURE OF NURSE IMPACT

The data from this survey contributes to Nurse Impact's goal of using data about nursing practice to improve outcomes in maternity care.

We continue to investigate how to use the multitude of data collected by nurses to address changes and invocation through nurse driven data feedback interventions.

We are responding to nurses' desire for their own data and working to ensure that the type, quantity, and quality of data provided is positively received and points to actionable strategies for quality improvement.
The Nurse Impact team created this study and report, a collaboration between Ariadne Labs and the Boston College, Connell School of Nursing.

Ariadne Labs is a joint center for health systems innovation at Brigham and Women’s Hospital and Harvard T.H. Chan School of Public Health. With a mission to save lives and reduce suffering, our vision is that health systems equitably deliver the best possible care for every patient, everywhere, every time.

Boston College, William F. Connell School of Nursing’s mission is to prepare compassionate, professionally competent nurses whose practice and scholarship are scientifically based and grounded in humanizing the experience of health and illness.

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