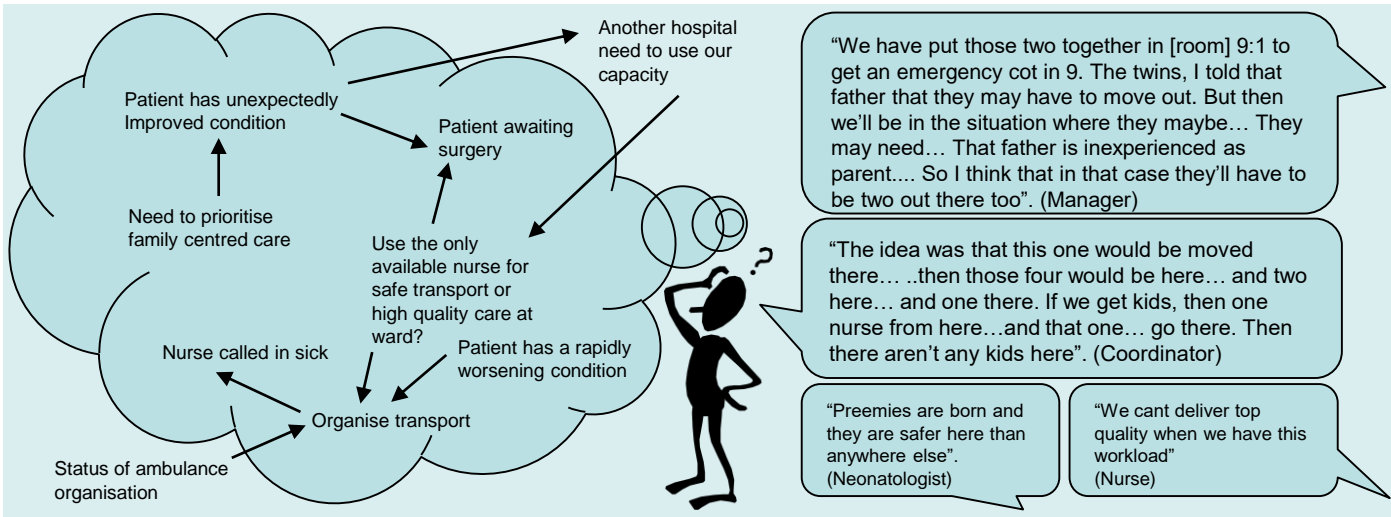


How safe care practices are managed in a neonatal intensive care unit – an explorative observational study of clinical coordinators at work

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Introduction

The Neonatal Intensive Care Unit represent a highly complex and risky work environment where critically ill babies constantly challenge safe care practises. In a complex adaptive system (CAS) such as this it is impossible to overview the consequences of every decision. Control is distributed over the whole system through a number of people representing varying functions. How this social structure inside the CAS translates in to managing work is not clearly mapped. A mapping that is important for future policy making.

Aim

To explore and describe how a clinical coordinator successfully balances the rapidly shifting demands of everyday clinical work within the organisational frames of a NICU to facilitate safe care practices.

Result and Conclusions

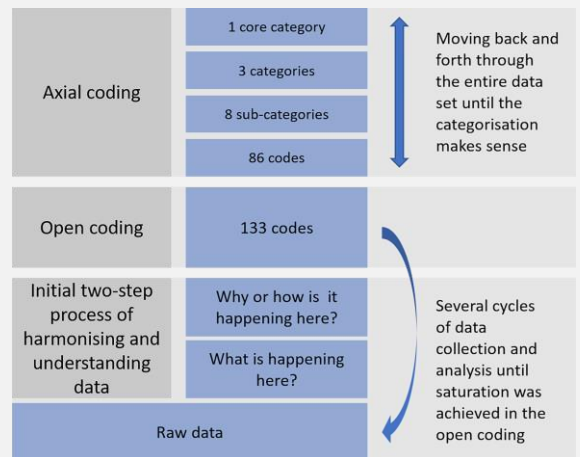
Keeping it all together, influencing problem-solving processes, and managing limitations of the physical environment are key elements in the joint cognitive system involved in coordination of patient care.

Sustained control of the highly complex work system requires the coordinator to move beyond rules and tailored responses; to find novel solutions. Ample preparation and support is needed. The nature of support is difficult to specify and therefore supply.



Method

Explorative study of a NICU in a Swedish tertiary care hospital using observational methodology. Clinical coordinators were shadowed through full work shifts for a total of 50 hours. A constructivist grounded theory approach was applied for the analysis.



Schematic overview of the analysis process with the raw data at the base and different phases and steps of coding going upwards. Keeping it all together, influencing problem-solving processes, and managing limitations of the physical environment are the three categories presented in the main results.

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