

'We need the findings of nursing care research'

In the interview: Andrea Schmidt-Rumposch, Director of Nursing and Board Member of Essen University Hospital

'For me, it is of existential importance that the nursing profession asks the most important questions itself and, above all, answers them itself.' In the cover interview with 'Monitor Versorgungsforschung', Andrea Schmidt-Rumposch, Director of Nursing and Board Member of Essen University Hospital, not only talks about the long transformation path that she has accompanied alongside Prof Dr Jochen A. Werner, Medical Director and Chairman of the Board of Directors, since 2017, but above all about a new self-image and also role model that the nursing profession must adopt if it wants to continue to meet the growing tasks in the future.

>> Mrs Schmidt-Rumposch, do carers complain too much?

There is a lot of room for improvement in nursing. The 'moaning' is probably justified. However, it would make more sense to talk about and discuss how carers and the nursing profession as such can play an active role in shaping the future and how each and every individual can become active themselves. This is the only way we can work together to help shape and strengthen nursing care and the nursing profession.

You yourself have been working in the healthcare sector for 36 years and have already been responsible for around 2,500 qualified employees in nursing and functional services in Essen for seven and a half years as Director of Nursing and Board Member of Essen University Hospital, who provide evidence-based patient care 365 days a year, manage the nursing process, coordinate procedures and accompany and support the use of the latest medical and medical technology procedures.

The number of people working for us and the large number of areas of activity mentioned above alone clearly show that it is absolutely essential to further develop and strengthen medical and nursing care. This must take place every day in the minds of our employees, but also in healthcare research and, of course, especially in my own. For the seven and a half years that I have been working at Essen University Hospital, , I have actively supported the transformation phase initiated by Professor Werner to become a smart hospital right from the start. At the recruitment interview with the Supervisory Board, I not only expressed my clear interest in joining the front row as Director of Nursing, but also in carrying out a status quo analysis to see where we actually stand at Essen University Medicine in terms of medical and nursing care, in order to then draw up an adapted concept for the future.

What did this analysis reveal?

I made many site visits and held discussions with a wide variety of people in order to form my own comprehensive picture. Questions about, among other things, the existing staffing levels including the mix of qualifications in the individual specialist areas, the quality of training and the care process or opportunities for staff development in the nursing specialismneeded to be answered. I then worked with my close management team to draw up a concept for the further development of medical/nursing care and to strengthen the nursing profession. We prioritised topics and set milestones. I presented the results at all levels in the company and actively discussed them. For me and for us, it was primarily important to further expand training in order to accelerate staff development and involve trainees even more actively. We also focussed on providing professional support for the introduction of our electronic patient file and digital care documentation as a whole. It was important to me to offer professional nursing development opportunities, including academic degrees. In the medium term, a degree programme should be established at our own medical faculty. Nursing should be enabled to actively participate in healthcare research.

'Without the findings of active nursing care research, we will not be able to support the translation that has been taking place in Essen for almost a decade with sufficient evidence.'

You just mentioned health services research.

Health services research has played a role in medicine for many decades and has managed to develop it further. In nursing care, however, health services research has hardly played a role to date. However, without the findings of active nursing care research, we will not be able to support the translation that has been taking place in Essen for almost a decade with sufficient evidence. That is why I have been in favour of developing nursing care on the one hand and health services research on the other from the very beginning. That's how I started out.

If you think back to the first few months at Essen University Hospital, then ...

... above all, I spoke intensively with many employees from many departments, listened very carefully and asked many questions: Where are we now? Where do we want to go? What is important? How much time do we have for direct patient care? What problems are there? What can be done better? Has evidence-based care been provided so far? What symptom and self-management do our patients need, especially oncological patients?

These are a lot of important questions that need answers.

For me, it is existentially important that the nursing profession asks the most important questions itself and, above all, answers them itself. If the nursing profession fails to do this, there is a risk that it will be presented with inadequate solutions from outside.

What happened after the 'Q&A session'?

We then drew up a plan together with the nursing managers and the individual nursing teams, which we used to start our own nursing transformation process. To accompany this, we held a large number of workshops on various topics right from the start, which led, among other things, to our nursing mission statement, which formulates our own standards that we want to apply to our nursing care - for the benefit of the patients we care for. At the very beginning, for example, it says: 'Our patients and their well-being are at the centre of everything we do. We derive our nursing care from the nursing process, which means that we focus on the individual health and care

goals of our patients. We recognise, take into account and use the needs, abilities and habits of our patients in our care.' (1)

What do you see as your personal task?

My colleagues can rely on me to create a structure in which they can organise care. And that we can always discuss how we can continue on this path together at any time. But also that they are given time to talk in individual networks about how they can develop themselves further. From the outset, however, regular discussion groups have also been set up to talk about our medical and nursing priorities and to set up and monitor corresponding projects.

We do this very consistently at Essen University Hospital. And I myself am responsible for ensuring that all of this harmonises as well as possible with the many tasks that nursing staff take on. That is my philosophy, which I take very seriously. We work with and for people, and the latter entrust themselves to our care. Ultimately, I am responsible for all these people.

Where do you see your most important management tasks?

I structure a wide range of process areas, from innovative care through to digitalisation and the major issues of staff retention and recruitment as well as staff development. For example, in the oncology focus area, we have clearly set ourselves the goal of giving nursing staff the opportunity to develop their nursing skills, which is why we also employ Bachelor's graduates with extended nursing practice. We are also organising the fifth Oncological Nursing Symposium (2) and the second Paediatric-Neonatal Nursing Symposium in September this year, which will focus on important topics such as the development of nursing care. (3)

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Doesn't transformation first and foremost take place in the mind?

Of course, everything starts with a change in thinking. But you not only have to have the will, which I can assume my employees and I have, but also the necessary time. To this end, we have set up our own staff unit at Essen University Hospital, which not only deals with personnel and organisational development,but is also intended to drive forward the development of nursing research. This includes identifying and reviewing current funding programmes in this area and analysing which of our topics we can use them to advance.

With success?

Absolutely. In the beginning, I certainly had some support from myself, but now I don't have to worry much about it any more. We have actually managed to win three care research projects funded by the BMBF, with which we can really make our contribution to strengthening the care profession from within care provision.

What are they?

Firstly, there is the BMBF-funded research project KIADEKU, a synonym for KI incontinence-associated dermatitis decubitus. This project builds on existing international developments in medicine, particularly in the field of image recognition and wound management. For the first time, this potential is to be utilised for nursing issues. The project is being run by the Development and Research Centre for Nursing at Essen University Hospital as part of a consortium that has managed to strengthen three of the most important care research areas. The joint partners are the Institute for Artificial Intelligence in Medicine at Essen University Hospital, Munich University Hospital and Sciendis GmbH.

Secondly, DigiCare is a joint project between Essen University Hospital, the University of Duisburg-Essen, HFH Hamburger Fern-Hochschule and the software provider m.Doc. It aims to improve the self-management and symptom management of oncological patients with the help of an app. They suffer from multiple symptoms during the course of their illness. Inadequate management leads to a reduction in quality of life, additional costs, unplanned hospitalisation and delays in treatment. The app supports an active role for oncological patients within interprofessional, trans-sectoral care structures.

The third project is developing an AI-based smart model for the transformation of hospitals in North Rhine-Westphalia as part of SmartHospital.NRW. This joint project, in which University Medicine Essen, RWTH Aachen University, TU Dortmund University, Fraunhofer MEVIS, m.Doc., Fraunhofer IAIS and Dedalus are involved, is working on an AI-supported health data analysis for early detection, risk assessment and diagnostic support. The aim is to improve the prediction of care-relevant risk factors such as falls, pressure sores, pain or delirium using AI in order to initiate personalised prophylactic measures at an early stage and avoid harmful events.

The transformation of Essen University Hospital is therefore also, and perhaps above all, one of digitalisation.

Exactly. Nursing is benefiting greatly from the digital transformation. For example, the electronic patient file (ePA) forms the basis of all digital processes at Essen University Hospital. Contrary to national developments, however, a comprehensive implementation of the ePA on the general wards was already completed at the University Medical Centre in 2018. In order to achieve the best possible digital support from the EMR, the existing paper-based documentation was not simply digitised, but all existing processes were scrutinised interprofessionally across departments and adapted to the new potential of the EMR. In order to utilise the full potential of the ePA, various instruments and tools were also integrated directly into the ePA and logically linked with each other. As a result, the care process is now completely digital, from admission to anamnesis and the initiation of individual measures and the documentation of risk factors through to discharge management. Incidentally, we have also used a movement sensor system that provides us with a relatively large amount of patient-specific data, which we can also use to conduct care research - even with AI support.

You also have a 'Nursing and Digitalisation' degree course.

The Bachelor's degree course in Nursing & Digitalisation, developed in cooperation between Essen University Hospital and the University of Applied Sciences for Economics and Management (FOM), is designed to prepare our students for the changes in practice and qualify them to take on controlling and patient-related activities in the digital transformation. The programme combines knowledge of nursing management and nursing science with content on digital clinical processes, digital change management, digital nursing and information technology. The course can be taken in parallel to training in the form of a dual study programme, so that after three years, students not only complete their training as a nurse, but also obtain a Bachelor of Arts degree in Nursing and Digitalisation.

Patient care, dual study programmes and care research from the care sector: How does it all work despite full beds?

We are a university medical centre that has hardly any blocked beds because we are actually able to provide patients with a high level of specialist care on more than 60 wards with beds and in 34 operating theatres and still have 130 nursing staff available in stand-in pools. In other words, we have managed to invest in staff retention on the one hand and, on the other, to achieve the necessary staff expansion, which is of course also made possible by our own degree programme. We also survey our trainees every year to assess the quality of their training and, of course, to increase their satisfaction. All of this means that we have a retention rate of over 90 per cent. On the other hand, I also take the time to scrutinise the departures from our nursing service, which are not solely due to retirement. Whenever people who work in nursing leave us, I want to know the reasons so that I can learn from them. Of course, all of this is completely anonymous, but it can also lead to further discussions with the ward manager on site or the hospital nursing service management if the person concerned so wishes. Sometimes it is possible to mediate or even counteract dismissals in this way.

However, it will certainly also happen that your employees move to temporary employment agencies ...

... and that we then employ them again at different rates and conditions. That does happen. However, I always try to try out other options beforehand, be it with bonus arrangements for more holiday, more flexible deployment planning or a bonus for working in our own staff pool.

What are you doing to improve patient care?

We naturally provide our patients with careaccording to evidence-based standards.

However, we are also trying to invest in our own accompanying care research, which should help us to become even better at symptom and self-management. For example, we are analysing whether our patients need to go to the outpatient clinic less between inpatient stays and also whether fewer rehospitalisations are necessary or - if necessary - can take place at longer intervals.

Are carers allowed to do everything they can?

Exactly not. I grew up in the former GDR and completed my nursing studies at the 'Jenny Marx' Medical College at Humboldt University in Berlin between 1987 and 1990 - almost at the time of German reunification on 3 October 1990. West Germany could have learned a lot from the GDR in terms of nursing. There, basic training was provided in nursing, followed by specialist postgraduate qualifications. The fields of activity and areas of responsibility were also broader, for example blood sampling was part of the training. The Nursing Act at the time was regressive; the nursing profession was only ascribed the role of 'participation' and 'assistance'. This was incomprehensible; we took responsibility for our activities as a matter of course. In the meantime, the reservation activities for the care process have only just been defined. It's no wonder that care is where it is. If we are completely honest, whoever writes the prescription for nursing care and, in particular, aids, is the carer and the doctor merely signs the prepared prescription. The benefits law is still regressive and, among other things, minimises the attractiveness of the nursing profession. It would make more sense and be more effective to enshrine differentiated



Andrea Schmidt-Rumposch

acompleted her nursing studies at the 'Jenny Marx' Medical College at Humboldt University in Berlin between 1987 and 1990 and then began working as a nurse at the Charité hospital. In 1999, Schmidt-Rumposch successfully completed her specialist training as a ward manager. From 2007 to 2010, she studied for a Bachelor of Science in Health and Care Management at the Alice Salomon University of Applied Sciences in Berlin. Schmidt-Rumposch held various management positions at the Charité, including Head of Nursing at the Charité Centre 12 for Internal Medicine and Dermatology from 2010 to 2014 and Deputy Director of Nursing at the Charité from 2014. In 2017, Schmidt-Rumposch moved to Essen University Hospital as Director of Nursing and Chief Nursing Officer.

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care with an interesting nursing development in law. I therefore advocate modernising the tasks and areas of responsibility for nursing patient care - and not just because we are still lagging behind worldwide.

Will the hospital reform help?

I don't think so, because the actual fundamental question is not being asked, which is: who should do what and with what qualifications? What needs do we actually have, both inpatient and outpatient? Which in rural areas and which in cities and metropolitan regions? All of these questions need to be answered as clearly as possible in order to redefine tasks and areas of responsibility in a multi-professional and interdisciplinary manner. If we manage to do this, we will not only achieve more effective and efficient patient care, but also significantly improve the attractiveness of the nursing profession.

What is your target that you want to achieve?

My goal is actually to create innovative, high-quality nursing care by strengthening the tasks of the nursing profession and investing in extremely good training.

Mrs Schmidt-Rumposch, thank you very much for the interview. <<

The interview was conducted by MVF Editor-in-Chief Peter Stegmaier.

Literatur/Links:

1: https://pflegedienst.uk-essen.de/pflege-am-uk-essen/
2: https://pflegedienst.uk-essen.de/essener-onkologisches-symposium/
3: https://pflegedienst.uk-essen.de/2-essener-paediatrisches-neonatologisches-pflegesymposium/

Zitationshinweis

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