The Skill Mix Model: A Preliminary Study of Changing Nurse Role Functions in Taiwan

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ABSTRACT

Background: Nursing shortage is a critical problem worldwide. Using nurse aides (NAs) within a skill mix model has been applied in the healthcare delivery system as a strategy to improve nursing workforce shortages.

Purpose: The purpose of this study was to investigate changes in nurse perceptions of their role functions under the skill mix model in Taiwan.

Methods: This was a cross-sectional designed study that employed a structured questionnaire. Participants included 38 registered nurses from three medical wards in three hospitals that had implemented the skill mix model for 6 months. The questionnaire gathered data on participant demographics, perceptions on the role functions, role and job satisfaction of nurses, and patient care quality. Nurses’ role functions were grouped into independent, dependent, and interdependent categories.

Results: Results demonstrate that nurses’ perceptions of independent and interdependent role function have changed since the implementation of the skill mix model. The most significant role changes in the independent function category included the nurse as educator of NAs, supervisor for patient care, and evaluator for nursing care outcomes. The most significant role changes in the interdependent function category included the nurse as integrator of nursing work and coordinator of the healthcare team. Nurses’ perceived changes increase in repetitive confirmation of patient conditions and patient care quality.

Conclusions: This study revealed that nurses working in skill mix model environments need more authority to delegate and educate NAs and to supervise and integrate nursing care. Study results may serve as a reference for hospital nursing practice in Taiwan.

Key Words: nurses’ role function, skill mix model, nurse aide.

Introduction

The shortage of professional nurses is a worldwide problem, and balancing cost-effectiveness that ensures quality care for patients is a concern of all medical institutions. Modern medical systems must offer different medical services that maintain and recognize care models that enhance quality of care. In response to severe competition within the medical environment and a shortage of nurses, coupled with a concern for the quality of care, many studies have planned and classified nursing duties to enhance patient care by reallocating labor and introducing nonprofessional human resources (Li, 2005; Lu, 2009; Jung, Pearcey, & Phillips, 1994). Studies have shown that the skill mix model can reduce medical costs and enhance nursing autonomy, allowing nurses to manage more resources and enhance the medical team relationship by providing better quality care to patients (Aiken, Sochalski, & Lake, 1997; Lee, Yeh, Chen, & Lien, 2005). Previous research suggests that assistants can help with daily care of patients and in alleviating some problems associated with the nursing shortage, giving nurses more time for professional activities and providing better care quality (Capuano & Kinneman, 1989; Powers, Dickey, & Ford, 1990).

During the SARS outbreak in Taiwan in 2003, infection control in hospitals and surrounding environments was recognized as a serious problem. Taiwan’s Health Department conducted and implemented a series of projects and studies on nurse staffing allocation that constructed a care model designed to enhance care quality, solve infection