

# The work of the nursing officer-2

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## 10. Tasks identified and work undertaken by nursing officers

(See Tables 4 and 5)

In reviewing the tasks carried out by nursing officers, 24 categories were identified. A miscellaneous section was added for those tasks which individually took less than 0.06% of time during the whole week. Mealtimes were included because many nursing officers either had telephone calls during that period or they discussed work-related matters with colleagues.

With meal breaks included, and the working week adjusted to a five-day week, the average time spent at work during the week was 43.57 hours. The average week was arrived at by taking the first five recorded days in the survey for each nursing officer.

## 11. The average adjusted times for the nursing divisions were:

	Hrs.	Mins.
Midwifery	44	44
General	45	43
Community	42	03
Psychiatry	41	52

No time spent on personal matters was recorded.

## 12. An average five-day week is shown here by taking all the tasks recorded and averaging the time spent on each task:

13. Table 5 is designed to show the average overall time spent on categories of tasks, that time converted into a percentage and a rank order established for (a) all nursing officers and (b) the individual divisions. Overall, it will be observed that 'office routine' accounted for 18.33% of the time. The work involved under this heading included recording of absence and sickness, booking of holidays for staff, arranging off-duty, checking and signing contracts of employment, reviewing accident forms and countersigning, writing reports, arranging staff coverage, recording and approving overtime, correspondence, writing minutes of meetings, reading circulars and minutes of other meetings.

'Visits to wards and departments' was ranked second overall and accounted for 16.64% of the total time available. All nursing officers in the hospital field saw this aspect of their work as important. 9.92% of time was allocated to the heading 'clinical involvement'. This covered checking and administering drugs, bedmaking, feeding patients, supervising treatments, ie tube feeds, catheterisation, venepuncture, etc.

14. These three headings accounted for nearly 45% of time available to a nursing officer in the week. 'Meal breaks' came next (9.87%), followed by 'consultation with others' (9.01%). This consultation included medical, nursing, ancillary, domestic, para-medical, works, supplies, and administrative staff. The subjects for discussion were very wide-ranging. 'Attendance at meetings' was recorded to be 7.77% and included meeting equipment and pharmaceutical representatives, medical services (including family planning), and unit meetings. The telephone took up nearly 7% of time and the giving and receiving of reports 5.42%. Those small 'one-off' jobs too small in terms of time spent on them to record, are recorded under the heading 'miscellaneous'.

## 15. Time spent on tasks in divisions (see Table 4)

Having looked at the overall averages of time spent on tasks by all the nursing officers, the averages within each major division are shown in Table 4.

In the three hospital nursing divisions the amount of time spent visiting wards varied by just under one hour in a week (8 hrs. 53 min. — 7 hrs. 50 min.). 'Office routine' varied considerably between the lowest of 6 hrs. 28 min. in Psychiatry, to the highest of 10 hrs. 13 min. in Community nursing — a difference of 3 hrs. 45 min. for the week. 'Clinical involvement', excluding Psychiatry, was between 4 hrs. 14 min. and 6 hrs. 44 min., the Community being 4 hrs. 50 min. Consultation that nursing officers have with other staff shows a fairly consistent pattern from 2 hrs. 40 min. to 4 hrs. 51

min. The giving and receiving of reports in the hospital divisions was similar from 2 hrs. 5 min. to 3 hrs. 4 min.

The use of the telephone varied by 56 minutes in the hospital service (1 hr. 48 min. to 2 hrs. 38 min.), with only two minutes difference between the General division, 2 hrs. 36 min., and Midwifery 2 hrs. 38 min. The Community staff spent twice as much time at 5 hrs. 34 min. and ranked second in the amount of time spent on tasks overall. This seems consistent with the difficulties of communication in the community setting.

16. The time spent on meetings also showed variations in each division. The General nursing officers spent least time in meetings at 2 hrs. 24 min. in a week, the Midwifery officers next at 3 hrs. 42 min. in a week, with Community staff taking 4 hrs. 4 min. of the working week, and Psychiatry 5 hrs. 21 min. The amount of counselling carried out was a small but important part of the work of a nursing officer. The time taken was extremely consistent with 41 minutes in General nursing, 55 minutes in Midwifery, and 59 minutes in Psychiatry.

Lastly, the time used while on duty to complete the daily activity sheets for this survey varied from 1 hr. 34 min. for Psychiatry, 1 hr. 17 min. in General, 1 hr. 15 min. in Midwifery, and only 12 minutes in Community.

## 17. The picture emerging from the information is that:

- over a day a week is spent visiting wards in the hospital divisions,
- a further day of the week is used on office time to complete a whole range of essential personal matters relating to the staff being managed,
- clinical involvement is seen as important in General, Midwifery, and Community fields, and approximately half to three-quarters of a day aggregated time is used to care for patients and/or to supervise treatment,
- a further half-day per week is used in consulting others on difficulties and problems arising out of the working situation,



**Table 4** Tasks identified and undertaken by nursing officers

General			
Rank order	Task	% of time used	Hours/minutes
1	Ward visits	19.83	8-53
2	Office routine	18.19	8-09
3	Meal breaks	9.91	4-31
4	Clinical involvement	9.48	4-14
5	Consult others	9.10	4-04
6	Reports	6.63	2-58
7	Telephone	5.68	2-36
8	Meetings	5.38	2-24
9	Miscellaneous	2.94	1-19
10	Survey	2.91	1-17
11	Counselling	1.78	0-48
12	Travel	1.72	0-46
13	Record patient activity	1.10	0-30
14	Check equipment	1.01	0-27
15	Interviews	0.98	0-26
16	Teach learners	0.82	0-22
17	Appraisals	0.72	0-19
18	Reallocate staff	0.63	0-17
19	Check drug cupboards	0.47	0-13
20	Order stores	0.33	0-09
21	Issue stores	0.22	0-06
22	Assess learners	0.07	0-02
<b>Total</b> (excl. personal time)		99.90	45-43

Community			
Rank order	Task	% of time used	Hours/minutes
1	Office routine	24.28	10-13
2	Telephone	13.24	5-34
3	Meal breaks	11.72	4-56
4	Consult others	11.53	4-51
5	Clinical involvement	11.47	4-50
6	Meetings	9.67	4-04
7	Travel	5.27	2-13
8	Interviews	4.64	1-57
9	Patient visits	2.06	0-52
10	Counselling	1.62	0-41
11	Miscellaneous	1.58	0-40
12	Inservice training	1.35	0-34
13	Teach learners	0.56	0-14
14	Reports	0.48	0-12
15	Survey	0.46	0-12
		99.93	42-03

Midwifery			
Rank order	Task	% of time used	Hours/Minutes
1	Ward visits	17.51	7-50
2	Office routine	16.17	7-14
3	Clinical involvement	15.03	6-44
4	Meal breaks	9.54	4-17
5	Meetings	8.27	3-42
6	Reports	6.83	3-04
7	Consult others	5.94	2-40
8	Telephone	5.88	2-38
9	Teach learners	3.65	1-38
10	Survey	2.78	1-15
11	Miscellaneous	2.78	1-01
12	Counselling	2.06	0-55
13	Interviews	1.43	0-38
14	Order stores	0.84	0-23
15	Travel	0.67	0-18
16	Issue stores	0.42	0-11
17	Check drug cupboards	0.37	0-10
18	Appraisal	0.12	0-03
19	Reallocate staff	0.10	0-03
		99.89	44.44

Psychiatry			
Rank order	Task	% of time used	Hours/minutes
1	Ward visits	21.24	8-56
2	Office routine	15.33	6-28
3	Meetings	12.71	5-21
4	Consult others	10.52	4-15
5	Meal breaks	8.16	3-26
6	Miscellaneous	5.00	2-06
7	Reports	4.94	2-05
8	Telephone	4.28	1-48
9	Group therapy	4.19	1-46
10	Survey	3.70	1-34
11	Counselling	2.34	0-59
12	Clinical involvement	1.93	0-49
13	Appraisal	1.72	0-43
14	Group Therapy (Plan)	1.43	0-36
15	Teach learners	1.04	0-26
16	Travel	0.49	0-12
17	Interviews	0.41	0-10
18	Reallocate staff	0.41	0-10
19	Check drug cupboards	0.06	0-02
		99.90	41.52

(e) attendance at meetings took up the equivalent of either a quarter to over half a day of the week,

(f) with the meal breaks included a half-day was identified with this activity.

This leaves just over a day's time in the week to undertake all the other tasks a nursing officer is called upon to undertake.

#### 18. Time spent on tasks between weekdays and weekends.

The time taken during the week on tasks was then compared with the time taken on tasks at the weekend (Saturday and Sunday). This comparison was made within the General, Psychiatric and Midwifery groups only. Community nursing officers had weekends off duty. The findings show:

##### (a) General

A reduction of time at weekends was shown on:

Meetings 6.05%

Consultation with others 3.00%

Plus slight reduction in 10 other tasks.

An increase in time spent on tasks was indicated in:

Clinical involvement 4.17%

Giving/receiving reports 2.74%

Recreational activities 2.47%

Ward visits 1.95%

Office routine 1.80%

Plus slight increase in time in five other activities.

##### (b) Psychiatry

Caution must be expressed in interpreting figures for psychiatry because only one nurse worked a full weekend and one for half a day.

##### (c) Midwifery

A reduction in time was recorded in tasks related to:

Attendance at meetings 10.35%

Office routine 7.73%

Consultation with other staff 3.61%

Interviews 2.02%

with six other tasks showing a slight decrease.

An increase of time was shown in:

Ward visits 6.73%

Clinical involvement 4.89%

Teaching learners 4.49%

Order of stores 2.90%

(weekend duty only)

and five tasks showing an increase in time.

Comparing the Midwifery and General divisions, both sections showed considerable reduction in time spent on attending meetings which was to be expected together with consultation with other staff.

Time at weekends was increased for clinical involvement and ward visits in both divisions.

19. Reviewing the satisfactory and unsatisfactory aspects of a nursing officer's work.



Table 5

TIME SPENT % OF TIME		TASK	RANK ORDER				
Hrs/Mins			Average General Midwifery Psychiatry Community				
8-03	18.33%	Office routine	1	2	2	2	1
7-19	16.64%	Visit wards/departments	2	1	1	1	9
4-22	9.92%	Clinical involvement	3	4	3	12	5
4-20	9.87%	Meal breaks	4	3	4	5	3
3-58	9.01%	Consultation with others	5	5	7	4	4
3-25	7.77%	Attend meetings	6	8	5	3	6
2-58	6.75%	Telephone calls	7	7	8	8	2
2-23	5.42%	Giving and receiving reports	8	6	6	7	14
1-16	2.87%	Miscellaneous	9	9	11	6	11
1-09	2.60%	Filling in of forms	10	10	10	10	15
0-50	1.89%	Counselling staff	11	11	12	11	10
0-50	1.89%	Travel	12	12	15	16	7
0-42	1.59%	Interviews	13	15	13	17	8
0-37	1.42%	Teach learners	14	16	9	15	13
0-16	0.62%	Staff appraisal	15	17	18	13	—
0-16	0.60%	Participate in group therapy	16	—	—	9	—
0-14	0.52%	Recreational activities	17	13	—	—	—
0-13	0.48%	Check equipment	18	14	—	—	—
0-10	0.38%	Reallocation of staff	19	18	19	17	—
0-09	0.34%	Order stores	20	20	14	—	—
0-08	0.31%	Check drug cupboards	21	19	17	19	—
0-06	0.22%	In service training	22	—	—	—	12
0-05	0.20%	Planning group therapy	23	—	—	14	—
0-05	0.19%	Issue stores	24	21	16	—	—
0-01	0.03%	Assessment of students	25	22	—	—	—
43-54	99.86%	No. of tasks	22	19	19	15	

Personal time has not been included.

## (b) Midwifery

Planning and training midwives, including clinical teaching (6); working/advising/liasing with senior medical staff (5), participating with nursing care of patients (5); counsel/appraise/interview staff (4); attendance at unit meetings/discussions/seminars (3); contact with all grades of staff (2); frequent contact and acting-up for senior nursing officer (2); planning meetings/discussions (2); identifying problems, taking action (1); special studies/projects (1); being a team leader (1); supervising pupil visits (1); participation in mothercraft classes (1); visiting wards (1); introducing new procedures (1); organisation of duty rotas/holidays (1). 37 tasks were identified as satisfactory. Of these, 22 (59%) were management orientated tasks, 8 (22%) were patient related, and 7 (19%) were teaching tasks (see Fig. 2).

## (c) Psychiatry

Responsibility to provide good/modern standards of care (5); improve quality of life for patients (3); arrange learner involvement and assessment (3); counsel and develop staff (3); multidisciplinary approach to problems (2); discharge to community long-stay patients (2); planning patient activities (1); involved in learner interviews (1); supervising group therapy sessions (1); participation in planning

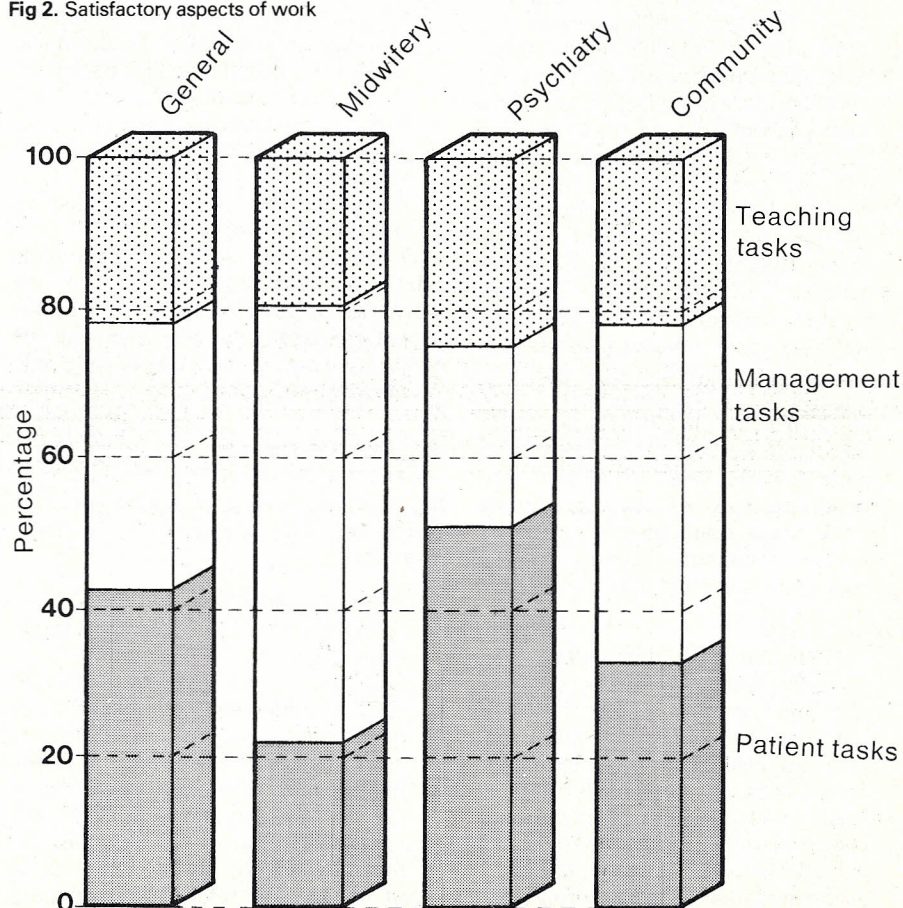
In the questionnaire given to the participants, they were asked to list in order of priority the satisfactory and unsatisfactory aspects of their work in terms of duties undertaken. From the replies received it was difficult to obtain a general average picture of the satisfactory and unsatisfactory aspects of a nursing officer's work. The results were better observed when shown under each nursing division separately.

## 20. Satisfactory aspects of work

### (a) General nursing

Visit wards/departments to check/maintain/improve standards of patient care (15); teaching students/conducting ward assessments (11); advise/counsel/support and develop staff (10); taking part in planning/managing patient care programme (including educational aspects) (3); used/recognised as nursing expert (3); liaison with medical and para-medical staff (2); general control and co-ordination of units (2); handling ward and administrative problems (1); acting-up for senior nursing officer (1); being in charge of a small hospital (1). Of the 49 tasks mentioned, 21 (43%) could be identified as relating to patients and their care, 17 (35%) as management tasks, and 11 (22%) as teaching tasks (see Figure 2).

Fig 2. Satisfactory aspects of work





nursing officer less acted-up in both the General and Midwifery divisions, two more acted-up than down in Psychiatry, and one more in the Community.

Comparing both questions together for all nursing officers, the results were:

- (a) No. of nursing officers having not acted up or down 11 (28.2%)
- (b) Acted down but not up 8 (20.5%)
- (c) Acted up but not down 10 (25.6%)
- (d) Acted up and down 10 (25.6%)

It will be seen, therefore, that a quarter of all nursing officers are involved in acting-up for a senior nursing officer and down in a clinical situation. The same number are acting-up for a senior nursing officer but not down in the clinical situation. A fifth act-down in the clinical area but not up for a senior nursing officer, and over a quarter do not act up or down.

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	Yes %	No %	Not % stated
(a) General	10 (55.5%)	7 (38.8%)	1 (5.5%)
(b) Midwifery	5 (62.5%)	3 (37.5%)	—
(c) Psychiatry	2 (33.3%)	3 (50.0%)	1 (16.6%)
(d) Community	1 (14.2%)	6 (85.7%)	—
Overall total	18 (46.1%)	19 (48.7%)	2 (5.12%)

	Yes %	No %	Not % stated
(a) General	9 (50.0%)	8 (44.4%)	1 (5.5%)
(b) Midwifery	4 (50.0%)	4 (50.0%)	—
(c) Psychiatry	4 (66.6%)	2 (33.3%)	—
(d) Community	2 (28.5%)	5 (71.4%)	—
Overall total	19 (48.71%)	19 (48.71%)	1 (2.56%)

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