Sinergia Project II

Monitoring the Impact of the DRG-Payment System on Nursing Service Context Factors in Swiss Acute Care Hospitals: Second Survey

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## **Abstract**

By 2012, the DRG-based reimbursement system was introduced to all acute care hospitals in Switzerland. It is well known that the DRG-payment system does insufficiently address nursing care. In other countries, DRG-introduction led to a reduction of nursing care, decreased quality of nursing care, decreased patient safety and patient satisfaction of care, and a decrease in the nursing work force. In order to monitor the change occurring with DRG-introduction, we conducted a first study and developed a model and corresponding instruments regarding these nursing service context factors. Baseline data were collected at the three University Hospitals Basel, Bern, and Zurich as well as at the Kantonsspital Winterthur and the Solothurner Spitäler AG prior to DRG-introduction in 2011. The study was embedded in a Sinergia project with the advantage of the interprofessional approach. The next step of our nursing subproject will allow us to conduct the second survey and the pre-post comparison. This second study is crucial since international literature shows that changes after DRG introduction were visible only after 1 to 5 years.

The overall aim of this multicenter follow up study is to conduct the first post DRG-introduction survey on nursing service context factors. With this pre-posttest mixed method design, changes after three years of DRG payment system should be detected. A further aim is to refine the model of nursing service context factors and the corresponding instruments in order to provide a comprehensive monitoring system for nurse managers in acute care hospitals. The last aim is to compare and contrast the results with those of other research groups of the Sinergia project.

A mixed methods embedded design will be chosen. In a preparation phase in 2014, the model as well as the instruments and the procedures will be refined based on the results of the first survey and pilot testing will be organized to be conducted in 2015. Quantitative and qualitative data collection for the second survey will start in Fall 2015. This before-after comparison will allow detecting changes in nursing service context factors over time. The study will be submitted to ethics committees in Basel, Bern, Solothurn and Zürich.