

INPLASY PROTOCOL

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Review Stage at time of this submission: Formal screening of search results against eligibility criteria.

Conflicts of interest:

None declared.

INTRODUCTION

Review question / Objective: Synthesize the state of the art on effective communication interventions to reduce missed care.

Communication interventions to reduce missed nursing care: a systematic review

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Review question / Objective: Synthesize the state of the art on effective communication interventions to reduce missed care. **Condition being studied:** The scientific evidence produced in recent years has described that between 20 and 80% of the care provided in health institutions is lost, especially the basic one (i.e., the discharge plan, health education, evaluation of progress and individualized attention), which is influenced, in turn, by the availability of sufficient and adequate material and human resources, the work environment, and interpersonal communication. In particular, it has been shown, for high-income countries, that promoting strategies that improve communication within health institutions has direct implications for the quality of care, since it improves teamwork and reduces lost care. . However, the evidence that accounts for communication interventions and their effectiveness in reducing missed care in low- and middle-income countries such as Mexico is practically non-existent. Contributing in this sense requires having a synthesis of the available evidence in this regard, which informs the development and implementation of effective interventions.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 24 May 2023 and was last updated on 24 May 2023 (registration number INPLASY202350090).

Rationale: The literature is conclusive in stating that the loss of nursing care negatively influences the quality of care provided to users of health services. Despite this, there are few studies that account for the factors that cause loss of

care, and successful interventions to reduce it. Existing studies focus on describing the care that is omitted; without inquiring about the development of effective interventions to reduce or prevent missed care. In particular, it has been suggested that ensuring effective communication between the people involved in providing and receiving it could contribute to mitigating missed care and the quality of care provided. It has also been emphasized that there is a need to deepen the analysis of communication interventions and, above all, of the mechanisms that increase their effectiveness to mitigate lost attention. However, in low- and middle-income countries, including Mexico, the literature that explicitly addresses this attribute is scarce, and even more scarce is that which provides evidence on interventions aimed at promoting it.

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METHODS

Search strategy: A systematic literature search will be carried out using search engines such as PubMed, SCOPUS, Web of Science, LILACS, SciELO, Virtual Health Library (BVS), Hinari, Cochrane, Google Scholar and Google. All searches will be performed on the same date. Language restrictions will apply to English, Spanish or Portuguese. Citation mining will be done to locate additional articles to ensure a comprehensive search; as well as the extraction of data from the UNAM repository. The search will include intervention studies (randomized, quasi-experimental controlled trials), scientific articles published in peer-reviewed journals, and gray literature published before March 23, 2023. We will apply the following search algorithms: (“Missed nursing care” OR “nursing care is missed” OR “Missed Care” OR “Miss Care” OR “missed care in nursing practice” OR “omission of nursing care” OR “unfinished nursing care”) AND (“Communication” OR “Communication interventions”); (“Missed nursing care”) AND (“Communication” OR “Communication interventions”); (“nursing care is missed”) AND (“Communication” OR “Communication interventions”); (“Missed Care”) AND (“Communication” OR “Communication interventions”); (“missed care in nursing practice”) AND (“Communication” OR “Communication interventions”); (“omission of nursing care”) AND (“Communication” OR “Communication interventions”); (“unfinished nursing care”) AND (“Communication” OR “Communication interventions”).

Participant or population: The population of interest for this review is nursing staff working in a health institution.

Intervention: Communication interventions.

Comparator: Group with intervention and control.

Study designs to be included: Intervention studies (randomized controlled trials, quasi-experimental, pre-experimental).

Eligibility criteria: The population of interest for this review is nursing staff working in a health institution.

Information sources: Sources to be searched include PubMed, SCOPUS, Web of Science, LILACS, SciELO, Virtual Health Library (BVS), Hinari, Cochrane, Google Scholar, and Google. Additionally, evidence will be sought in TeniUNAM and other data sources.

Main outcome(s): Measurement of association and effectiveness of communication interventions to reduce lost attention:

Nurse-nurse communication

Nurse-patient communication

Nurse-other health professionals communication doctor nurse communication.

Additional outcome(s): None.

Data management: Two investigators will independently review studies, extract relevant data from articles, and assess risk of bias. When there is a discrepancy, a third person will be involved. If no data is available from the manuscripts, the corresponding authors or co-authors will be contacted to obtain the original data.

Quality assessment / Risk of bias analysis: Risk of bias, described in the Cochrane tool, such as generating random sequences or concealing allocation (selection bias), linkage of participants (performance bias), linkage of outcome assessment (detection bias), outcome data incompleteness (attrition bias), selective reporting (reporting bias) and other biases will be assessed for included studies and all studies as overall risk of bias using tools such as Newcastle–Ottawa scale, Robins-1, RoB2, SYRCLE , among others.

Strategy of data synthesis: A systematic review table will be prepared considering the components of the PICO acronym. Revman version 5.4.1 software will be used for the possibility of developing a meta-analysis, if there is sufficient evidence. The

random effect mode will be used to estimate the effect size.

Subgroup analysis: To assess the effects of possible confounding factors, studies will be selected for subgroup analyses, divided into control and intervention groups.

Sensitivity analysis: Sensitivity analysis would be performed when the pooled result had a high risk of heterogeneity.

Language restriction: English, Spanish and Portuguese.

Country(ies) involved: Mexico.

Other relevant information: None.

Keywords: Missed nursing care, nursing staff, communication interventions.

Dissemination plans: The study will be submitted for publication in a peer-reviewed journal and will be presented at a scientific outreach event.

Contributions of each author:

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