

Poster Session I  
#11

*Evidence To Support Continuity In Nursing Care On Patient Outcomes*

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**Purpose:** To evaluate the evidence describing the relationship between continuity in care (CIC) and patient outcomes, with focus on continuity in nursing care (CINC).

**Background:** There is extensive literature on how CIC impacts patient outcomes in a wide variety of healthcare settings. In the acute care environment, care provided by a limited number of nurses allows the nurse to acquire knowledge about the unique needs of an individual patient and family. Specifically, a better CINC would enable the nurse to develop an understanding of the patient's illness and needs and allow the nurse to be a better advocate for the patient and family.

**Methods:** Studies from 1998 to 2010 were identified using PubMed, ISI web of science, and ProQuest search databases. Inclusion criteria included database articles that 1) included all healthcare disciplines, 2) measured CIC as an intervention, an index, or dichotomous variable, 3) defined CIC provided by a single or multiple provider, 4) investigated CIC as independent variable and patient outcomes as dependent variable. Relevant articles found in bibliographies were also included.

**Findings:** 26 studies were identified in this review. Papers that examined the relationship between CIC and patient outcomes were predominantly conducted in the outpatient setting and the evidence was mixed. Papers generally found that CIC was associated with being well-cared for. Some studies found that CIC reduced morbidity, hospital admissions and readmissions, emergency department visits, while others found no association. Data supporting the impact of CIC on improved management of chronic disease and satisfaction with care was mixed. The findings in the inpatient setting generally indicated that better CIC was positively associated with being well-cared for. Diversity in research design and the operational definition of CIC limits the generalizability of these findings.

**Conclusions:** Overall, the literature supports the relationship between better CIC and improved patient outcomes. CINC may be a desirable attribute of any model of nursing care delivery. More research on CINC, especially in the inpatient setting, is desirable.