Abstract

Patterns of Missed Nursing Care in Oncology: An Observational Study in a Primary Nursing Context

Sofia Calandro[1,2], Andrea Moro[3], Stefania Grisanti[3], Giorgio Magon[3], Maura Lusignani[4]

[1] Direction for Healthcare Professions, Territorial Health and Social Care Authority of North Milan, Bassini Hospital, Milan, Italy
[2] Master's Degree in Nursing and Midwifery Sciences, University of Milan, Milan, Italy
[3] Direction for Healthcare Professions, European Institute of Oncology IRCCS, Milan, Italy
[4] Department of Biomedical Sciences for Health, University of Milan, Milan, Italy
(Corresponding Author: sofia.calandro98@gmail.com)

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Introduction. Increasing care complexity and shrinking resources expose healthcare systems to the risk of Missed Nursing Care. This phenomenon is associated with adverse clinical and professional outcomes. In oncology, this vulnerability is further amplified by the need to ensure continuity of care, patient education, and a trusting therapeutic relationship. In this context, Primary Nursing may help reduce omissions through accountability and continuity in care delivery; however, evidence remains limited, particularly in the Italian setting.

Methods. A monocentric, cross-sectional descriptive observational study was conducted in an Italian oncology IRCCS adopting the Primary Nursing model. Following approval by the Lombardia 2 Territorial Ethics Committee, data were collected digitally between January and February 2026 using the validated Italian version of the MISSCARE Survey. Nurses and healthcare assistants working in medical and surgical wards who provided informed consent were enrolled (n = 79). Data were analysed using descriptive and inferential statistics.

Results. Correlational analyses showed that Missed Nursing Care was not randomly distributed but tended to cluster into recurring patterns. The strongest association emerged between discharge planning and therapeutic education for patients and their families ($\rho = 0.816$), suggesting a close interdependence between continuity of care and educational care management. Additional clusters involved clinical reassessment, patient condition assessment, monitoring, and treatment management. Strong correlations also emerged among organizational determinants, particularly within relational and communication-related dimensions. Compared with the literature, a partly different profile was observed: omissions related to patient education and continuity of care, often reported among the most frequent, were less represented in this setting, whereas some basic care activities appeared more prominent.

Discussion. The strongest correlations among care activities and organizational determinants suggest that the omission of a single care activity may act as a sentinel indicator of broader systemic criticalities. From this perspective, the nurse manager plays a strategic role in identifying and

addressing these clusters, thereby guiding targeted organizational interventions.

Keywords: Missed Nursing Care, Oncology Nursing, Primary Nursing

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