A study to assess the knowledge on factors affecting nursing practices among nursing staffs in NMCH at Nellore

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Abstract

Background: Nurse is advanced nursing practice are well positioned to respond to the evolution of health care in particular advanced nursing plays in key role in meeting the health needs by building the nursing knowledge advancing the nursing profession and contributing to sustained and effective health care system. Factors affecting nursing practice are work environment, nurse to patient ratio quackery, media, internship, poor remuneration, absolute legislation on nursing education and practice.

Aim: The aim of the study was to assess the level of knowledge on factors affecting nursing practices among nursing staffs.

Objectives: 1. to assess the level of knowledge on factors affecting nursing practice among nursing staffs in NMCH. 2. To associate the level of knowledge on factors affecting nursing practice among nursing staffs with their demographic variables.

Methodology: 100 nurses from Narayana Medical College Hospital, Nellore were selected by using non probability purposive sampling technique.

Results: The study concluded that, majority of nursing staffs, 52(52%) had moderate knowledge regarding factors affecting nursing practice.

Keywords: knowledge, factors, nursing practices, nursing staffs

Introduction

Advanced nursing practice in the umbrella term describing an advanced level of clinical nursing practice that maximizes the use of graduate educational preparation in depth nursing knowledge and expertise in meeting the health need of individual Families group community populations [1]. Nurse is advanced nursing practice are well positioned to respond to the evolution of health care in particular advanced nursing plays in key role in meeting the health needs by building the nursing knowledge advancing the nursing profession and contributing to sustained and effective health care system. Factors affecting nursing practice are work environment, nurse to patient ratio quackery, media, internship, poor remuneration, absolute legislation on nursing education and practice [2].

Work environment high quality of nursing care depends on multiple underlying structure and process factors, such as the availability of sufficient supplies and equipments, facilities nurse engagement and job satisfaction, all of which influence outcome the work environment plays a large role in the ability to provide quality care. A comparative analysis of the work environment in private and public settings exposes a lot of discrepancies. The work environment in public hospitals adversely hamper quality nursing care. Ragging from unhealthy nursing work, inadequate rest, erratic power supplies, absolute equipments, no running water, lack of work incentives, motivation and insufficient compensation, and these unfriendly environment impacts everything from the safety of patients and their care giver to job satisfaction [3].

Media these are stereotype demean our profession and are an affort to the year’s privilege of delivering care to the patients. The media’s negative view of the profession acts as a powerful force to shape the public’s attitude and prejudice their mind set. An average Nigerian movie sells 50,000 copies extrapolate this figure in term of negative publicity of nurses in these movies and it become oblivious how the media is killing our public profile and affecting our practice. Media continually undermines nursing by its portal in movies. Nurses have often been unfairly and an realistically portrayed as lacking empathy and negative light [4].

Need for the study

Nurse to patient ratio registered nurse constitute an around the clock surveillance system in hospitals for early detection and prompt intervention, when patient condition deteriorates. Nurse in our public setting have become an burdened-burdened out surveillance system. They experienced job related burnouts and low job satisfaction levels. The government isn’t recruiting more nurses to car for world health organization recommends. A nurses-patient
ratio 1:4 for general ward and 1:1 for specialist unit like ICU, most public hospital nurse patients ratios ranges from 1:16 to 30. Research has consistently showed that nurses in hospital with the highest patient to nurse ratio like in the government hospitals are more than twice as likely to experience job related burnout and almost twice as likely to be dissatisfied with their job compared with nurse in the hospitals with the lowest ratio [5]. Factors affecting the performance of professional nurses in Namibia, South Africa. Namibia with per capita income of $2274, but is below the global average of $10307 (WHO/SIS) with great inequality in the distribution of income. The economy depend on many on mining such as diamond uranium gold, silver and copper(Namibia Government identified health challenges and needs individual efficient health care services poor human resources management poor performance of health personal resulting in poor quality of services general feeling of desponding amongst health care worker due to limited opportunities for carrier advancement in the health work force is regarded as essential to improving efficiency productivity and quality of care [6]. Hanan Al Ahmadi (Institute of public administration, Saudi Arabia, 2015) conducted a study on factors affecting performance of hospital nurse at Saudi Arabia. In total 15 hospitals were randomly selected. The questionnaire was send to 1834 nurses in these 923 nurses were responded. The study finds that job performance is positively correlated with organizational commitment, job satisfaction and personal variables. Both job satisfaction and organizational commitment are strong predictors of nurses performance [7]. Anneke. L. Francke (2014): Conducted a descriptive study on how nurses and their work environment affect patient experience of the quantity care. The sample size 26 nurses were required through purposeful sampling. The study result shows that according to participants a diverse range of elements affects patient experiences of the quality of nursing care. The study concluded that in co-operating these elements in to daily nursing practice would result in more positive patient experience [8].

Problem statement
A study to assess the knowledge on factors affecting nursing practices among nursing staffs in NMCH at Nellore.

Objectives
- To assess the level of knowledge on factors affecting nursing practice among nursing staffs in NMCH.
- To associate the level of knowledge on factors affecting nursing practice among nursing staffs with their demographic variables.

Delimitations
The study is delimited to;
- Nurses working in Narayana Medical College Hospital, Nellore.
- Sample size is limited to 100.

Methodology
Research approach
A quantitative approach was adopted to determine the research study.

Research design
The present study was conducted by non experimental descriptive research design.

Setting
The study was conducted in Narayana Medical College Hospital at Nellore.

Population
Target population: The target population of the present study includes all nurses.

Accessible population: The accessible population of the study is nurses working in Narayana Medical College Hospital, Nellore.

Sample Size
The sample size of the present study was 100 nurses.

Sample Technique
Sample for the study was selected by non probability purposive sampling technique.

Sample Criteria
Inclusive criteria
- A study involves both males and females.
- Nursing staffs working in Narayana Medical College Hospital at Nellore.
- Available at the time of data collection.

Exclusive criteria
- Nurses who are not interested to participate in the study.
- Nurses who are on leave at the time of data collection.

Variable of the study
Demographic variable: Demographic variables such as age, gender, educational, qualification, work experience and area of working.

Research variable: Factors affecting nursing practice among nursing staffs.

Description of the tool
It consists of two parts:

Part-I: Consists of socio demographic variables.

Part-II: It consists of structured questionnaire with 34 items to determine level of knowledge regarding factors affecting nursing practice among nursing staff in NMCH.

Scoring Interpretation

<table>
<thead>
<tr>
<th>S. No</th>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A+</td>
<td>More than 85%</td>
</tr>
<tr>
<td>2.</td>
<td>A</td>
<td>More than 75%</td>
</tr>
<tr>
<td>3.</td>
<td>B+</td>
<td>More than 65%</td>
</tr>
<tr>
<td>4.</td>
<td>B</td>
<td>More than 55%</td>
</tr>
<tr>
<td>5.</td>
<td>C</td>
<td>More than 50%</td>
</tr>
<tr>
<td>6.</td>
<td>D</td>
<td>Less than 50%</td>
</tr>
</tbody>
</table>
Data Analysis & Discussion

Table 1: Level of knowledge regarding factors affecting nursing practice among nursing staffs. (n=100)

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>B+</td>
<td>22</td>
<td>22</td>
</tr>
<tr>
<td>B</td>
<td>52</td>
<td>52</td>
</tr>
<tr>
<td>C</td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>D</td>
<td>8</td>
<td>8</td>
</tr>
</tbody>
</table>

Table no-1: shows that with regard to level of knowledge, among nursing staffs, 5(5%) had A grade knowledge, 22(22%) had B+ grade knowledge, 52(52%) had B grade knowledge, 13(13%) had C grade knowledge and 8(8%) had D grade knowledge.

Table 2: Mean and standard deviation of level of knowledge among nursing staffs.

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff nurses</td>
<td>21.05</td>
<td>2.70</td>
</tr>
</tbody>
</table>

Table 3: Association between level of knowledge among nursing staffs with selected socio demographic variables, (n=100)

<table>
<thead>
<tr>
<th>S. No</th>
<th>Demographic variables</th>
<th>A</th>
<th>B+</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>Chi square (X²)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Work experience</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C=26.07</td>
</tr>
<tr>
<td></td>
<td>a. Below 1 year</td>
<td>3</td>
<td>3</td>
<td>7</td>
<td>15</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>b. 1-2 years</td>
<td>1</td>
<td>1</td>
<td>11</td>
<td>11</td>
<td>7</td>
<td>7 5 5 5</td>
</tr>
<tr>
<td></td>
<td>c. 3-4 years</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>7</td>
<td>1 1 2 2</td>
</tr>
<tr>
<td></td>
<td>d. Above 4 years</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>- - - -</td>
</tr>
<tr>
<td>2.</td>
<td>Area of working</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C=39.32</td>
</tr>
<tr>
<td></td>
<td>a. Pediatric ward</td>
<td>3</td>
<td>3</td>
<td>7</td>
<td>15</td>
<td>5</td>
<td>1 1 2 2</td>
</tr>
<tr>
<td></td>
<td>b. Neurology ward</td>
<td>-</td>
<td>-</td>
<td>3</td>
<td>3</td>
<td>5</td>
<td>2 1 1 1</td>
</tr>
<tr>
<td></td>
<td>c. ICU</td>
<td>2</td>
<td>2</td>
<td>10</td>
<td>10</td>
<td>4</td>
<td>4 2 2 2</td>
</tr>
<tr>
<td></td>
<td>d. Medical ward</td>
<td>3</td>
<td>3</td>
<td>9</td>
<td>9</td>
<td>3</td>
<td>5 5 3 3</td>
</tr>
<tr>
<td>3.</td>
<td>Any CNE program attended</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C=17.12</td>
</tr>
<tr>
<td></td>
<td>a. Yes</td>
<td>3</td>
<td>3</td>
<td>17</td>
<td>17</td>
<td>39</td>
<td>11 6 6</td>
</tr>
<tr>
<td></td>
<td>b. No</td>
<td>2</td>
<td>2</td>
<td>5</td>
<td>5</td>
<td>13</td>
<td>13 2 2 2</td>
</tr>
</tbody>
</table>

Major findings of the study
- Regarding the level of knowledge, among nursing staffs, 5(5%) had A grade knowledge, 22(22%) had B+ grade knowledge, 52(52%) had B grade knowledge, 13(13%) had C grade knowledge and 8(8%) had D grade knowledge.
- The mean score of knowledge level of staff nurses was 21.05 and standard deviation was 2.70.
- Regarding association between level of knowledge and demographic variables, Work experience, Area of working and Any CNE program attended had significant association at P<0.05 level.

Conclusion
The study concluded that, majority of nursing staffs,
52(52%) had moderate knowledge regarding factors affecting nursing practice.

References