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- The extent to which patients hospitalized in a certain region of turkey are aware of the defined duties of nurses

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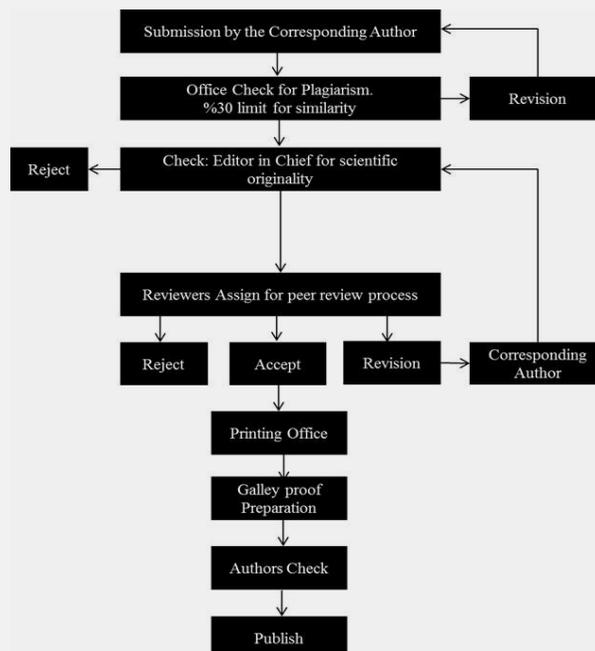
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The extent to which patients hospitalized in a certain region of turkey are aware of the defined duties of nurses

Cigdem Kockar^{1*}, Fatma Genc², Ayse Yabaci², Arif Ugur²

Abstract

Objective: Aim: This study was conducted to determine the extent to which patients hospitalized in a certain region of Turkey are aware of the defined duties of nurses. Material and Methods: The population of this descriptive study consisted of inpatients who were hospitalized in Giresun State Hospital between January-May 2015. The study included 207 patients. The study data were collected using this nursing practices perception form prepared by the investigators. The data were assessed through numeric and percentage analyses.

Results: Of the patients who took part in the study, 44.4% were between 59 and 79 years of age. A large majority of the patients responded to the questions asked them regarding nursing practices stating that nurses are engaged in treatments and measure temperature-heart rate-blood pressure (99.5% and 98.1%). 85.4% of the patients stated that they saw care giving as a duty of nurses. Approximately 97.1% of the participating patients stated that they administer first aid treatment in emergency cases and 59.9% that they help patients in exercising. Some 71% of the participating patients said that nurses arrange the diets of patients.

Conclusion: Based on the data obtained from the patients included in the study, it was concluded that a large majority of the inpatients were aware of the defined duties of nurses, but they thought that the practices of other healthcare professionals were also carried out by nurses.

Keywords: Forearm fracture, infra-clavicular block, 0.5% levobupivacaine, dexamethasone

Introduction

The presence of disease, which is defined by the World Health Organization as injury to an organism or impairment of the inner balance of an organism, since the early ages and the discovery of new treatment methods in every age have led to the formation of the healthcare systems functioning today. Fast technological developments in the healthcare sector and increasing demand for quality healthcare have raised the question of providing quality services to individuals and communities. The concept of patient satisfaction has become an important criterion for the quality of healthcare (1).

Many measurement materials have been used and studies conducted to measure patient satisfaction, which is defined as the core criterion showing the quality of care and giving information about the extent to which patient values and expectations are met (2-5).

The most important connection point between the patient and the institution in an inpatient setting is the nursing services. The success of nursing services is a major factor affecting patient satisfaction (6). Today, the competition among health institutions, increased

importance of cost-effectiveness, shortened hospitalization time and widespread use of advanced technologies have brought about the need to determine patients' perception of care and the importance they attach to nursing interventions (7). Nursing care is a major indicator of successful healthcare across the world. The comments of an individual patient help the nurse reassess the care she has given (8).

We see that this subject has been approached within the framework of patient perception and regulative actions have been evaluated from this patient perspective in most of the studies carried out on service satisfaction in the recent years (9).

The way patients perceive nursing services depends also to a large extent on some factors such as the patient's social status, age, education level and cultural background (10, 11). Satisfaction with nursing care is an important parameter in terms of the quality of healthcare services. However, it is also important here what patients perceive from nursing care and whether they are aware of the limits of nurses' duties and responsibilities. If a patient is unaware of the duty

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limits of nursing services, he/she may expect the duties and responsibilities of various profession groups to be performed by nurses, leading to a perception that such duties not fulfilled by nurses remain as undelivered services. Therefore, before measuring satisfaction, it may be necessary to determine the knowledge of inpatients on nursing care, nursing services and nurses' duties. In this way, improper expectations relating to nurses' duties can be eliminated and it can be ensured that the results of studies on patient satisfaction with nursing care are more consistent and reliable..

Material and method

Study setting

The study was conducted as descriptive at the medical and surgical clinics of Giresun State Hospital, Turkey.

Sample size and sample technique

The study population consisted of patients hospitalized at the medical and surgical clinics of Giresun State Hospital. The study sample included the patients who were hospitalized between January-May 2015 (N=207). No sampling method was used in the study, which was performed with those who were hospitalized between the abovementioned dates and met the inclusion criteria.

Inclusion Criteria

- being hospitalized at least one day in one of the medical and surgical clinics of the above-named hospital,
- being 18 years of age or older,
- not having been diagnosed with any psychiatric disorder,
- having agreed to take part in the study.

Data Collection Forms

Personal Information Form, Perceived Nursing Practices Form

1. Personal Information Form: Developed by the investigators, the form consisted of 6 questions inquiring the socio-demographic characteristics of the patients.

2. Perceived Nursing Practices Form: Again prepared by the investigators, this form consisted of 21 questions about the defined roles of nurses (monitoring, caregiving, treatment, etc.) with literature (12, 13). The five responses the patients wrote most for the choice "Other" and thought to be a duty of nurses have been added to the results (Table 3).

Statistical analysis

The data were analyzed using the SPSS 21 package program. The percentile test was used to assess the data

Ethical Considerations

Legal permission was obtained from the relevant institutions to conduct the study. The research began after approval from the Ethics Committee was received. Official permissions from the respective hospital was obtained to collect the study data. Informed consent was obtained from patients..

Results

Of the patients taking part in the study, 44.4% were between 59 and 79 years of age, 55.1% were male, and 44% were graduates of primary school. The hospitalization time was 1-10 days in 74.4% of the patients and 57.5% of them were staying in surgical clinics (Table 1).

Table 1: Distribution of Socio-demographic Characteristics of Patients

Socio-demographic Characteristics of Patients	N	%
Age		
18-37	23	11.1
38-58	72	34.8
59-79	92	44.4
80 years years and over	20	9.7
Gender		
Female	93	44.9
Male	114	55.1
Clinics		
Surgical	119	57.5
Medical	88	42.5
Education		
Illiterate	74	37.5
Primary School	91	44.0
Secondary School	17	8.2
High School	17	8.2
University and above	8	3.1
Hospitalization Time		
1-10 days	154	74.4
11-20 days	41	19.8
21 days and longer	12	5.8
Occupation		
Housewife	88	42.5
Civil servant / laborer	41	19.8
Retired	25	12.1
Farmer	22	10.6
Other	31	15.0

The patients were asked questions about nursing practices. A large majority of the patients who responded to these questions answered them as “nurses are engaged in treatment and they measure fever,

pulses and blood pressure” (99.5% and 98.1%). 96.6% of the participating patients stated that the duties of nurses included filling out patient files and 27.7% deciding on what the disease of the patient was (Table 2).

Table 2. Distribution of Patient Responses about Defined Duties of Nurses

Responses about Defined Duties of Nurses	Yes		No	
	N	%	N	%
Give patients their medications	206	99.5	1	0.5
Measure blood pressures of patients	207	100	0	0
Measure fevers of patients	203	98.1	4	1.9
Measure pulses of patients	206	99.5	1	0.5
Give care to patients	175	84.5	32	15.5
Give information about patients' diseases	118	57.0	89	43.0
Explain procedures administered to patients and why they were administered	158	76.3	49	23.7
Welcome patients and help them to get ready for examination	189	91.3	18	8.7
While giving care to patients, they consider the human needs such as breathing, excretion, feeding, sleeping and cleaning and practices accordingly	190	91.8	17	8.2
Provide first aid treatment in emergency cases	201	97.1	6	2.9
Regularly supply medication to patients	199	96.1	8	3.9
Set up serum apparatus	207	100	0	0
Keep records of general conditions of patients	178	86.0	29	14.0
Explain what to do and what not to do for patients to recover	182	87.9	25	12.1
Explain patients what to be careful about after being discharged	161	77.8	46	22.2
Provide information to patient families about the disease and the general condition of their patient	153	73.9	54	26.1
Perform body cleaning of patients (mouth care, body care, hair wash)	85	41.1	122	58.9
Answer patient questions	191	92.3	16	7.7
Organize works in the clinic	199	96.1	8	3.9
Delegate duties to the staff	186	89.9	21	10.1
Draw blood from patients	206	99.5	1	0.5

Table 3. Distribution of Patient Responses about Duties not Attributed to Nurses

Responses about Duties not Defined for Nurses	Yes		No	
	N	%	N	%
Fill out patient files	200	96.6	7	3.4
Decide on the disease patient has	56	27.1	251	72.9
Help patients do exercises	124	59.9	83	40.1
Arrange diets for patients (determine what to eat and what not to eat)	147	71.0	60	29.0

While 85.4% of the patients stated first that giving care was a duty of nurses, this ratio fell down to 41.1% when the concept of care was explained to them (mouth care, body care, hair wash, etc.). 91.3% of the participating patients stated that nurses answer patient questions, 76.3% of them that nurses explain the procedures administered to the patient and why they were administered, and 91.3% that nurses welcome patients into the clinic and help them get ready for their examinations. 97.1% of the patients stated that nurses perform first aid treatment in emergency cases, 59.9% that nurses help patients do their exercises, 71% that nurses prepare patient diets, 77.8% that nurses educate patients as to what they should be careful about after being discharged, 73.9% that nurses provide information to patient families about the disease and the general condition of their patient, 92.3% that nurses answer patient questions, 96.1% that nurses organize the works in the clinic, and 89.9% that they delegate duties to the staff (Table 2, Table 3).

Discussion

A large majority of the patients participating in the study seemed to be aware of nursing roles such as treatment administration, taking vital signs, and educating patients and their families about the disease and how to care for it. In a study conducted, it was found that nurses usually performed routine applications such as treatment, vital signs, training to patients and their families (14).

In this study, 58.9% of patients stated that hygiene practices were not the task of nurses. The insufficient number of nurses in the department and the necessity to keep out-of-job records prevented the fulfillment of maintenance roles such as providing individual hygiene (15, 16).

Alongside the roles pertaining to nurses, the patients were found to perceive the roles of physiotherapy and nutrition-dietetic specialists such as helping patients exercise (59.9%) and deciding on patients' diets (71.0%) also among the nurses' roles. In study conducted by Karadag and Tasci, it was found that 64.3% of the nurses had active passive exercises. In the same study, 95.1% of the nurses were accompanied by food distribution (14).

Nurses may have caused this perception in patients with having active passive exercise and accompanying food delivery.

96.6% of the participating patients stated that filling out patient files were among the nurses' duties. Keeping records has been considered as one of the most important steps of nursing care since quite a long time ago and the importance of keeping records has been stressed for ensuring systematic care (17). However, some records that need to be kept in the clinics by other profession groups such as secretaries and doctors and that do not involve any nursing interventions are also expected to be kept by nurses for various reasons. According to the results of a study made by Sönmez et al., 38 of the 68 different record keeping forms that are kept by nurses were found to have nothing to do with their profession (18). Different studies in this area also support the result that nurses have to keep records of different employees (19, 20). Nurses who have been made to keep these records that are outside the scope of their data keeping and processing duties may have been ascribed this file keeping role by the patients.

While 85.4% of the patients stated first that giving care was a duty of nurses, this ratio fell down to 41.1% when the concept of care was explained to them (mouth care, body care, hair wash, etc.). Both insufficient number of nurses despite extensive patient traffic in clinics and nurses being obliged to perform many roles that are outside the scope of their duties and responsibilities as mentioned above may have rendered nurses unable to fulfill their prime function of giving care by losing time in doing other works (14,21).

Conclusion

It was concluded that a large majority of the inpatients were aware of the defined duties of nurses, but they thought that the practices of other healthcare professionals were also carried out by nurses. Alongside the roles pertaining to nurses, the patients were found to perceive the roles of physiotherapy and nutrition-dietetic specialists such as helping patients exercise and deciding on patients' diets also among the nurses' roles.

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