Medical Nurse's Perception of Care for Patients with Chronic Disease

Kazuya Ikenishi¹*, Takayo Noda²**, Mutsuo Deguchi¹**

¹Lecture, ²Professor,
¹Faculty of Nursing, Shoin University, 9-1, Morinosato-Wakamiya, Atsugi city, Kanagawa Prefecture, Japan. ²School of Nursing, Aichi Kiwami Nursing College, 5-4-1, Jogan-dori, Ichinomiya city, Aichi Prefecture, Japan.

Corresponding Author: Kazuya Ikenishi

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ABSTRACT

This study aimed to clarify the relationship between nurse’s WLB and their perception of care for patients in medical ward. Subjects of this survey were nurses working at general hospitals and core hospitals in some areas in Japan. Supposed nurses showed satisfaction on their WLB as well as approbatory perception of nursing care for patients in medical ward; we thought that there was a possible of providing high quality nursing care continually, because early studies reported that nurse’s satisfaction of WLB was related to perception of high quality of nursing care. We investigated two hospitals included medical wards in Japan. Most of patients who were hospitalized in these wards had chronic disease. The result of analysis revealed the significant relationship between satisfaction of WLB with approbatory perception of nursing care. Consequently, it was suggested that supporting nurses to raise the WLB lead to improving the quality of nursing care for patients in medical ward.

Keywords: Nursing Care, Quality of Health Care, Nursing Service Hospital, Medical-Surgical Nursing.

INTRODUCTION

The health policy have been implemented for the purpose of accelerating inpatients’ return home addition to shortening number of days spent in hospital in Japan. In other words, nurse must provide nursing care to more patients per year or per month due to shorter length of hospital stay. Therefore, we considered there was a necessity to explicit perception of nurse on their provided care to inpatients, while more efficient and high quality nursing care had been required.

However, we cannot observe the quality of care directly. Because early studies reported the quality of nursing care related with job satisfaction among nurses, [1-4] we used the scale on job satisfaction included perception of nurse about their care for the sake of evaluating quality of the care indirectly. The scale had some items which cooperation with medical stuff at their work. We thought that these items could be utilized in this study because such question items were related to quality of nursing care.

[5]

Namely, because it was considered a necessity of evaluating the quality of nursing care to inpatient, we analyzed the perception of nurses on their care.

Moreover, according to differences between medical ward and surgical ward, findings in earlier studies on job satisfaction of nurses differed among various wards. [6] Consequently, it was thought that analyzing about only medical wards allowed us to make clear discussion on analysis results and significances of this study.
In this study, we analyzed presence of difference on the perception by responses of nurses' work-life-balance (WLB). If there were difference of the perception by it, the result may have suggested necessity of support with improvement of their WLB for the sake of getting more high quality of nursing care.

In this study, medical ward was defined as places that patients were generally hospitalized for the purpose of not surgical treatment but medical one. In fact, hospitals surveyed in this study had medical wards as well as surgical wards, and mixed one. Therefore, the mixed ward was excluded from subjects of this analysis. Moreover, there were many patients with chronic disease in medical wards in hospitals of object of this survey.

We left a study on surgical wards nursing as future issue. This study focused on nursing care at only medical wards.

Aim: The purpose of this study was to clarify the relationship medical nurses' WLB with perception of their nursing care for patients suffering from chronic disease.

MATERIALS AND METHODS

Subject

Non experimental research approach with cross sectional survey research was used. This survey was done at 2 hospitals at Kanto area and Tokai area in Japan. The former (Hospital A) has 572 beds and the latter (Hospital B) has 808 beds, 273 nurses and 726 nurses, respectively.

Both hospitals are a general hospital and a core hospital at own area. We asked nurses who worked at medical wards in these hospitals except for nursing assistant, nurse administrator (head of nursing department).

Patients with digestive system diseases and lung diseases, vascular diseases, mental diseases, metabolic disease etc were treated there. The period of survey was from June, 2014 to November, 2014.

Ethical considerations

Ethical approvals were obtained from the research ethics committee of Aichi Kiwami College of Nursing (Aichi Kiwami College of Nursing, No7-2014). The researcher explained the content of this study in detail to Directors General of the Nursing Department in hospitals and obtained their consent to it. Subjects of this survey were given questionnaires with the printed explanation. Indicated consent to our survey was made if they were willing to complete and return the questionnaires to the researchers.

Methods

Analyzed data were a part of one which we had collected in 2014. Subjects of the survey were nurses worked in hospital. The analyzed data in this study were from nurses worked in only medical wards.

Self administered questionnaire was adopted as survey method. The survey items of attribute information on respondent consisted of age, sex, educational background, years of nursing experience. Besides them, 16 items of perception of nursing care were included in it. These were picked out among the questionnaires of nurses' job satisfaction comprised 40 items. [7] However, this study didn't use these attribute information because we wanted to analyze the relationship nurse’s perception on their care with their WLB simply.

The questionnaires included items about perception of nurse management, employee benefit programs, career advancement, interpersonal relationships in ward/hospital, and so forth. However, we used only the 16 items focused on perception of nursing care.

In addition to these, respondents were requested to answer an item of WLB with alternatives containing "Satisfaction", "Dissatisfaction" and "Neither".

Statistical analysis

In the beginning, we reversed score of inversed question items which had higher score correspondingly to negative evaluation about nursing care. Then, Cronbach's coefficient alpha carried out as reliability analysis about the 16 items on perception of care. After narrowing down these to represent nurses' perception of care
indeed, we examined a difference of the total score of items on nursing care among two hospitals. At last, we analyzed the presence of relevance between the total score and WLB by means of one-way analysis of variance (One-way ANOVA).

The level of significance was set at p < 0.05. Data were analyzed using SAS university edition and SPSS ver 20.

RESULTS

We had 536 respondents in this survey. Excluding nurses working at surgical ward and pediatric ward, maternity ward etc, only data on nurses in medical ward were extracted. Consequently, 142 analysis subjects remained.

Question items related with nursing care were 16, which included 7 items were reverse score questions. Therefore, these items needed to reverse score so that a higher total score implied recognition that respondent’s practices of nursing care were better.

Then, we conducted the Cronbach’s α reliability test for the purpose of removal items with lower statistic and corrected items- total correlation. As a result, 9 items remained and the value of the Cronbach's α of total items increased 0.785 from 0.747.

Concerning total score of 9 items related with nursing care, median was 27 points; minimum was 17, maximum was 35 (range 9 to 45 points). It didn’t accept a significant difference on total score between two hospitals (p=0.681).

Table 1: Univariate statistics of the total score with respondents

<table>
<thead>
<tr>
<th>Hospital</th>
<th>N (people)</th>
<th>Median (points)</th>
<th>Range (points)</th>
<th>P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>31</td>
<td>27</td>
<td>19-35</td>
<td>0.681</td>
</tr>
<tr>
<td>B</td>
<td>111</td>
<td>27</td>
<td>17-35</td>
<td></td>
</tr>
</tbody>
</table>

*Mann-Whitney U test

Moreover, it didn’t accept a significant difference on number of nurse relating to recognition of the WLB between two hospitals (p=0.602).

Table 2: Univariate statistics of the WLB with respondents

<table>
<thead>
<tr>
<th>Hospital</th>
<th>WLB: Satisfied (people)</th>
<th>WLB: Dissatisfied (people)</th>
<th>WLB: Neither (people)</th>
<th>P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>11</td>
<td>10</td>
<td>10</td>
<td>0.602</td>
</tr>
<tr>
<td>B</td>
<td>29</td>
<td>42</td>
<td>40</td>
<td></td>
</tr>
</tbody>
</table>

* Fisher’s exact test

On the other hand, it was a significant difference between the WLB and the distribution of total score of 9 items related with nursing care (p=0.010).

Table 3: One-way ANOVA on the total score adjusted with the WLB.

<table>
<thead>
<tr>
<th>WLB</th>
<th>Satisfied (points)</th>
<th>Dissatisfied (points)</th>
<th>Neither (points)</th>
<th>P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median</td>
<td>28</td>
<td>26</td>
<td>27</td>
<td>0.010</td>
</tr>
</tbody>
</table>

*Kruskal-Wallis test

Then, as a result of multiple comparison on the total score adjusted with the WLB, it was a significant difference on the total score between groups of “Satisfied” and “Dissatisfied” on WLB (p=0.005).

Table 4: Multiple comparisons on the total score adjusted with the WLB.

<table>
<thead>
<tr>
<th>Groups of WLB</th>
<th>P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfied / Dissatisfied</td>
<td>0.005</td>
</tr>
<tr>
<td>Satisfied / Neither</td>
<td>0.536</td>
</tr>
<tr>
<td>Dissatisfied / Neither</td>
<td>0.067</td>
</tr>
</tbody>
</table>

*Games-Howell test

DISCUSSION

In terms of nurses working at medical wards, we found a significant difference on perception of nursing care between nurses with “Satisfied” and them with “Dissatisfied” on the WLB. Moreover, nurses responding satisfaction on it perceived their conducted nursing care as good one compared with them did dissatisfaction.

These surveyed medical wards were places which persons with chronic disease received medical treatment. They need to have nursing intervention for the sake of taking care of something by patient herself. Such a nursing care will take time and require nurse to have persevering sometime. However, if patient can retard to get worse by herself and live as much of
wish as possible by means of taking nursing care, nurse get fulfillment in her work.

On the other hand, getting such a feeling of satisfaction on her job may be affected by whether she had stable life or not. Therefore, this study aimed to analyze the relation between the WLB and perception of nursing care. Consequently, the result of analysis suggested that nurse who satisfied on the WLB recognized her nursing care for patient approbatory.

Accordingly, in order to provide good nursing care for patient with chronic disease, we believe the adjustment of nursing work environment so that the WLB of nurse get better, in addition to improvement in quality of nursing care.

Nevertheless, we didn’t reveal what kind of work environment in this study. Furthermore, because of not adjusting any confounding factor, it remained room for improvement of reliability of analysis on the relation between the WLB and nursing care. These are subjects for future analysis.

CONCLUSION

Concerning nurses working at medical ward, it was found that there is a statistically significant relationship between approbatory perception of her nursing care for patient with chronic disease and nurse’s satisfaction on the WLB.

REFERENCES


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