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Satisfaction and comfort with nursing in Australian general practice



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Summary The practice nursing workforce has grown exponentially in recent years. Whilst evidence has shown the important contributions of nurses to general practice service delivery, the consumer perspective of nursing in general practice has received limited attention. Given that acceptability of nurses is influenced by patient satisfaction which can in turn improve both treatment adherence and clinical outcomes, this is an important area for investigation. The primary aim of this study was to evaluate consumer satisfaction with chronic disease management by nurses in general practice (NiGP) and comfort with the tasks undertaken by nurses in general practice.

Consumers receiving chronic disease services from nurses in general practice participating in a larger study were recruited to complete a survey. The survey comprised of demographic information, and items related to satisfaction with the nurse encounter (SPN-9) and consumer comfort with nurse roles in general practice (CPN-18).

Eighty-one consumers participated in the study. Cronbach's alpha values of the SPN-9 and the CPN-18 were 0.95 and 0.97 respectively. SPN-9 results demonstrated high levels of satisfaction with PN consultations. Bivariate analysis did not show any significant differences within the consumer group relating to satisfaction. However, those who presented for diabetes-related reasons were more likely to report high comfort levels with the nurse encounter compare to those who presented to general practice for other chronic disease conditions (38% versus 14%, $p=0.016$).

The results of this study demonstrate that consumers are generally satisfied with nursing consultations in general practice related to chronic disease. However, further research evaluating consumer confidence, comfort and satisfaction with nursing care is needed to ensure that nursing services meet consumer needs.

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1. Introduction

The considerable growth of nursing in general practice in the last decade has exposed many more consumers to nursing services in this setting (Australian Medicare Local Alliance, 2012). In 2012, an estimated 63.5% of Australian general practices employed a nurse, representing a workforce of over 10 693 nurses (Australian Medicare Local Alliance, 2012). This growth in the primary care workforce is an international strategy to manage the increasing burdens of chronic and complex disease and population ageing being faced by all industrialised nations. Strong primary care systems that support early intervention and self-management have been demonstrated to improve outcomes (Coleman, Austin, Brach, & Wagner, 2009). Additionally, consumer participation in chronic disease management and adherence with therapeutic regimes is influenced by the acceptability of and patient satisfaction with the services provided by health professionals (Cheraghi-Sohi et al., 2008; Sitzia & Wood, 1997; van Dam, van der Horst, van den Borne, Ryckman, & Crebolder, 2003). It is recognised that consumer confidence or comfort with a health professional's role has a clear impact on satisfaction (Spreng & Page, 2001). Therefore, it is timely to investigate the acceptability of the nursing role and consumer satisfaction with nurses in general practice setting as a strategy to optimise service delivery and health outcomes.

Internationally, it is only in recent years that attention has been paid to evaluating the consumers perspective of the nurses' role in general practice (Hegney, Price, Patterson, Martin-McDonald, & Rees, 2004; Redsell, Stokes, Jackson, Hastings, & Baker, 2007). In the United Kingdom, research has shown consumer support for practice nurses (PNs) highlighting that they have more time to listen to patient concerns and are more likely to develop care plans that are suitable for consumers (Poulton, 1996; Redsell et al., 2007). A recently published survey from New Zealand also demonstrated that there was general support for the nurses' role in general practice and satisfaction with nursing services (Halcomb, Davies, & Salamonson, *in press*; Halcomb, Peters, & Davies, 2013). However, qualitative data demonstrated a level of confusion amongst consumers about the exact nature and scope of the nursing role in general practice (Halcomb et al., 2013).

Several recently published Australian studies have explored various aspects of consumer perceptions of general practice nurses. Unlike previous studies that sought perceptions of the public, these papers explored the perspectives of consumers of nursing services. In 2011, Halcomb et al. reported the development of a tool to measure consumer satisfaction with nurses in general practice, that was subsequently used in the New Zealand evaluation (Halcomb et al., *in press*). This study showed that demographic characteristics, such as age, gender and employment status significantly impacted upon satisfaction with the nurse (Halcomb et al., *in press*).

A further Australian study was reported by Mahomed, St John, and Patterson (2012). This study undertook in-depth interviews using a grounded theory approach to develop a theory of patient satisfaction with a practice nurse-led intervention for chronic disease management. Additionally,

Desborough, Banfield, and Parker (2013) developed a tool to measure a combination of patient enablement and satisfaction with practice nurse services. Whilst these studies have added to our understanding of consumers perceptions of and satisfaction with nursing services in general practice, they each have a distinct focus that means that they each provide one piece of a large and complex issue. Further research is required to explore additional dimensions of the concepts under investigation.

2. Method

2.1. Data collection

Data were collected as part of a mixed methods study exploring the changing role of practice nurses in chronic disease management. Other aspects of this larger study have been published previously (Halcomb, Davidson, & Brown, 2010). This paper reports on the discrete data collected via a consumer survey.

A convenience sample of general practices within NSW that employed practice nurses volunteered to participate, following advertisements distributed via General Practice NSW. Recruitment of consumer participants was undertaken over a six to eight week period at each Practice. After receiving services from a participating practice nurse, consumers were given an information pack containing a plain English information sheet and survey form by the Practice Administration staff. Contact details of the primary investigators were included in the information pack should consumers need any further information regarding the study. A sealed box was provided at each participating Practice for consumers to return their survey forms. Alternatively consumers were provided with a reply paid envelope and facsimile number should they wish to return the completed form directly to the research team. Consumers who had a cognitive impairment that would impact on their ability to provide informed consent or those who were unable to read and write sufficient English to complete the survey form were excluded from the study. These consumers were identified by the practice nurse and not offered a survey package.

The Human Research Ethics Committee of the University of Western Sydney granted approval for the conduct of the survey (Approval No. H6774) before the commencement of participant recruitment.

2.2. Survey instrument

A survey tool was developed based on a review of the literature (Cook, 2013) and individual consultation with key stakeholders, including the Australian Primary Care Nurses Association, experts in primary care nursing and nursing research and consumers. The final survey tool comprised a total of 33 items. The initial six items collected demographic data about the consumer. A further nine items used a 5-point Likert scale (Highly Dissatisfied–Highly Satisfied) to explore the consumer's satisfaction with the practice nurse (SPN-9). The remaining eighteen items evaluated consumer levels of comfort with the practice nurse undertaking

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