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Research Article

The Effect of Intentional Nursing Rounds Based on the Care Model on Patients' Perceived Nursing Quality and their Satisfaction with Nursing Services

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ABSTRACT

Purpose: This study examined the effects of intentional nursing rounds based on the care model on patients' perceived nursing quality and their satisfaction with nursing services.

Methods: The study design was a nonequivalent control group pretest-posttest design. The participants were assigned to the intervention group or the control group in two orthopedic wards of a teaching hospital. A total of 9 rounds (at 7 AM, 9 AM, 12 PM, 3 PM, 5 PM, 8 PM, 10 PM, 2 AM, and 5 AM) were performed every 2 or 3 hours to the experimental group. The intentional nursing rounding intervention was developed through a theoretical development program involving six basic principles which are maintaining belief, knowing, being with, doing for, enabling, and patients' wellness. To evaluate the effects of intentional nursing rounds, data were collected through the Perception of Quality Nursing Care Scale and the Patients' Satisfaction with Nursing Care Quality Questionnaire.

Results: The participants were 70 patients (experimental group) and 75 patients (control group). Results of difference-in-difference analysis confirmed that the patient-perceived nursing quality level from the experimental group was 0.85 points (out of 5.00) higher ($p = .041$) and the satisfaction with nursing services level was 8.28 points (out of 110.00) higher ($p < .001$) than the control group.

Conclusions: These results proposed that intentional nursing rounds based on the care model were effective in improving perception of quality nursing care and patients' satisfaction with nursing care. Structured patient-oriented intentional nursing rounds based on the care model are expected to expand to a variety of clinical settings further.

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Introduction

The growing use of health-care services has led to growing competition among hospitals, and the social trend of professionalism and globalization has promoted hospitals' enlargement and specialization [1]. Heightened expectations and needs from the public have naturally let health-care organizations pursue higher quality of health-care services and continue to keep up with the ever-changing health-care environment [2].

Evaluating patients' satisfaction is a crucial element that might exert a great effect on hospitals' profits and management [3].

Thus, hospitals make every effort to provide high-quality health-care services and to enhance patients' level of satisfaction [2]. Of all the possible elements related with their satisfaction, the level of medical treatments and nursing services are crucial factors for hospitalized patients' satisfaction [4]. A set of nursing factors affecting patients' satisfaction would include their relationship with nurses, appropriateness of nursing, trust in nurses, continuous nursing, nurses' responses to patients' needs, and time nurses take on patients [5]. As expected, when the nursing services could meet the nursing needs, patients have trust in nurses [6]. Thus, strategies for proper nursing and patients' higher satisfaction should be developed and implemented by taking these factors into consideration.

Intentional rounding refers to nurses' checking patients at a regular interval. It differs from conventional rounding in terms of consistency in services and the use of an organized checklist of

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tasks [7]. Nurses will check the so-called 4P in intentional rounding which refers to four basic needs of patients: (1) pain; (2) positioning; (3) potty; and (4) proximity of personal items. Intentional rounding for an interaction with patients would help predict their nursing needs, conditions, and environment and consequently solve the issues [8]. Recent literature reported that hourly rounding helped reduce patients' anxiety and enhance their satisfaction by consequent trust-building [9]. Patients would expect that nurses would assess patient's basic needs by their regular checkup. Moreover, regular rounding has shown the decrease in the occurrence of falls and bed sores [10]. From nurses' angle, one of its positive effects would be the number of patient calls decreased, which would reduce nurses' working stress [11].

Very few researches on intentional rounding have been reported in the literature in Korea, though many scholars have reported about its positive effect on patients' satisfaction in other countries outside Korea. A few possible causes for little use of intentional rounding in Korea might include the following: (1) difficulty in standardizing nursing rounds due to various circumstances of patients; (2) increased burden on nurses from rounding every hour or every two hours; (3) insufficiency of nursing manpower; and (4) the reality that most hospitalized patients would have guardians in their wards in Korea [6]. However, since 2013, the Ministry of Health and Welfare in Korea announced the strategic policy of comprehensive nursing care; it is being implemented and will expand to large-size general hospitals [12]. Such a circumstantial change might add significance to intentional hourly rounding.

The quality of nursing service functionally depends on patients' perception. Quality of nursing care might benefit patients by promoting their health and meeting their needs without harm [3]. Some studies report that patients place a high emphasis on nurses' affective activities for patients' perceived nursing quality than technical nursing skills [5,9]. Research on health-care service quality including nursing care has mainly focused on the gap between patient expectations and perceptions of service quality [13]. Papanikolaou and Zygiaris [14] examined patients' expectations and satisfaction in Greece health-care centers. Their findings indicate that patients had different expectations. A comparison between expectations and perceptions showed that there was a greater gap in an empathy dimension. Some studies have found a positive association between health-care service quality and patient satisfaction as well as a positive relationship between health care and patients' satisfaction [6,15]. Therefore, it should not be viewed from nurses' angle but from patients', and nursing care should meet patients' needs and desires [16]. Patients' experience with nursing care has become a focal point for quality improvement as attention to patient-centered care has increased [17].

Nursing should basically promote patients' health and help enhance their recovering, peace, and well-being. In short, it should involve patient-oriented activities [18]. Also, although it is very important to clarify the factors influencing the patients' satisfaction with nursing services, previous studies were centered on nurse-patient relationship rather than patient-orientated experiences [13]. Thus, nurses should, first of all, identify the needs of a patient and provide services according to those customized needs [6]. In such a context, patient-oriented care might as well adopt intentional nursing rounds.

Swanson [19] emphasized the importance of nurses' real practice of caring at clinical settings and proposed five caring processes. She described the five concepts, namely knowing, being with, doing for, enabling, and maintaining belief. Each caring process has sub-dimensions as the basis for nursing interventions and is suitable for the nursing process [15]. It is assumed that the focus of nursing is not on a patient's illness but on assisting patients to maintain or

regain optimal level of wellness [20]. The goal of nursing is to promote the peace of subjects. In this case, therapeutic techniques to communicate with patients are extremely important [19]. Swanson [20], in turn, discussed how care could be promoted and maintained in clinical settings and proposed a variety of circumstances where interaction would happen between nurses and patients.

The current research adopted the Professional Practice Model (PPM) [21] developed at the University of North Carolina Hospital on the basis of Swanson's model [19]. Multidimensional hourly rounding was conducted for the research subjects to identify its effect [19]. Such type of nursing rounds would draw patient-oriented nursing care with identification of their basic needs [8]. Also, the research aims to evaluate patients' perceived nursing quality and their satisfaction with nursing services.

The hypotheses are as follows: (1) hypothesis 1—The experimental group under intentional nursing rounds will reveal a higher level of perceived nursing quality than the control group without rounding service; and (2) hypothesis 2—The experimental group under intentional nursing rounds will reveal a higher level of satisfaction with nursing services than the control group without rounding service.

Methods

Study design

This research is a quasi-experimental study with a nonequivalent control group nonsynchronized design to examine the effect of intentional rounding conducted to a group of hospitalized patients in two general surgical wards of a large metropolitan teaching hospital. Control group and experimental group were assigned according to the admission order, and experimental groups were allocated after the treatment of control group with the time difference.

Conceptual framework

This study adopted the PPM [21] developed at University of North Carolina Hospital on the basis of Swanson's care model [19]. The PPM [21] was grounded in the theory explaining the nature of nursing care, Swanson's middle range theory of caring [19]. Multidimensional nursing rounds in the PPM were implemented to measure the effect of intentional nursing rounds. The Swanson theory of caring has five basic principles, which are maintaining belief, knowing, being with, doing for, and enabling/empowering. Each caring process has subdimensions as the basis for nursing intervention and is applicable to the nursing process [19]. It is assumed that the focus of nursing is not on a person's disease but on assisting patients to attain, maintain, or regain optimal level of well-being [20]. The PPM [21] is based on concepts such as nursing provision, professional relationship, values of professional nursing, rewards, and leadership. This research was conducted with its basis on multidimensional nursing rounds of Carolina Care.

The framework was selected because it is consistent with system mission, vision, and values of the health-care system.

Setting and samples

The number of participants was calculated with the following conditions: (1) a significance level of α at .05; (2) a power of .80; and (3) an effect size of 0.25 in an independent t-test. The effect size was verified by the study on intentional nursing rounds for patients by Yang et al. [6]. In the present study, the number of participants calculated for each group was 52. Considering the

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