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Original Article

Patient outcomes in the field of nursing: A concept analysis

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ABSTRACT

Purpose: This paper reports an analysis of the concept of patient outcomes.**Methods:** The Walker and Avant concept analysis approach was applied.**Results:** The attributes of patient outcomes include (1) patient functional status (maintained or improved), (2) patient safety (protected or unharmed), and (3) patient satisfaction (patient reporting of comfort and contentment). These attributes are influenced by the antecedents of individual patient characteristics and health problems, the structure of healthcare organizations and received health interventions. Additionally, patient outcomes do significantly impact the quality of nursing care, the cost of effective care and healthcare policy making formulation.**Conclusion:** Providing good nursing care to all patients is a central goal of nursing. Patient outcomes in nursing are primarily about the results for the patient receiving nursing care. This analysis provides nurses with a new perspective by helping them to understand all the components within the concept of patient outcomes.

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1. Introduction

Patient outcomes are the central measures used in learning about the effectiveness of cost-sensitive, quality health care [1]. A number of private and government healthcare organizations such as the Joint Commission of Accreditation on Healthcare Organization of the USA and the Canadian Council on Health Services Accreditation have been established to

evaluate and ensure the quality of health care. Additionally, outcomes have been used to provide a quantitative basis for making clinical decisions, to measure the effect of care on patients, to measure the efficacy of care and to determine areas for care improvement [2]. Despite the importance of the patient outcomes concept, there has not been enough focus on all aspects of this complex concept in the nursing discipline. Furthermore, different researchers have provided different definitions. The purpose of our concept analysis is to

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clarify and describe the multifaceted nature of patient outcomes within the field of nursing.

The term ‘patient outcomes’ is used frequently in health-care research [3–6]. For example, the measures of patient outcomes used by Aiken et al. include failure-to-rescue rates and 30-day mortality [3]. Suhonen et al. used health-related quality of life, patient autonomy and patient satisfaction [4]. Shuldham et al. measured patient falls, upper gastrointestinal bleeding, pneumonia, sepsis, shock, pressure sores and deep vein thrombosis [5]. Mallidou et al. used quality of care and adverse patient events (medication errors, patient falls, and nosocomial infections) to measure patient outcomes [6]. Like much of the research into patient outcomes, most of these studies define patient outcomes through measurement and use definitions that are related to the specific aims of the study. However, there is no standard conceptual definition of patient outcomes within nursing.

Concept analysis identifies unique characteristics of each concept and provides researchers with a precise operational definition of that concept. In addition, concept analysis can refine ambiguous concepts within a theory. It can then provide a more basic and deeper understanding of the underlying attributes of that concept [7]. In this paper, to examine nursing-related patient-outcome concepts, we used the eight-step-process of (1) select a concept, (2) determine the purpose of the analysis, (3) identify all uses of the concept, (4) determine the defining attributes, (5) construct a model case, (6) identify antecedents, (7) identify consequences, and (8) define empirical referents [7].

2. Definitions of patient outcomes

2.1. Dictionary definitions of patient outcomes

‘Patient outcomes’ does not appear in dictionaries as one term. However, ‘patient’ and ‘outcomes’ can be found separately.

First, according to the Merriam-Webster’s Advanced Learner’s English Dictionary, a patient is ‘a person who received medical care or treatment’ [8]. The DK Oxford Illustrated English-Chinese Dictionary defines a patient as ‘a person receiving or registered to receive medical treatment’ [9]. The Longman Dictionary of Contemporary English defines a patient as ‘someone who is receiving medical treatment from a doctor or in a hospital’ [10].

Second, according to the Merriam-Webster’s Advanced Learner’s English Dictionary, an outcome is ‘something that happens as a result of an activity or process’ [8]. According to the DK Oxford American Illustrated English-Chinese Dictionary, an outcome is ‘a result; a visible result’ [9]. The Longman Dictionary of Contemporary English defines outcome as ‘the final result of a meeting, discussion, war etc – used especially when no one knows what it will be until it actually happens’ [10]. The Cambridge International Dictionary of English with Chinese translation defines outcome as ‘a result or effect of an action, situation, etc’ [11].

2.2. Literature definitions of patient outcomes

Apart from dictionary definitions, both of the terms ‘outcomes’ and ‘patient outcomes’ also appear in the medical

literature. Lang and Marek defined outcomes in terms as simple as ‘the end results’, or similarly as ‘the results from some action or event’ [12]. Duffy and Hoskinsas defined outcomes as the consequences of the provision of health care [13]. In Donabedian’s quality of care mode, outcomes are referred to as the result of the care given [14]. Harris defined outcomes as the end points of care, substantial changes in the health condition of a patient, and changes in patient behavior caused by medical interventions [15]. Given these definitions, outcomes related to clinical practice could be defined as any change that resulted from health care. The term ‘patient outcomes’ is used by physicians, nurses, and other healthcare professionals. Each profession defines patient outcomes and has developed outcome measures that focus on the standards, activities, and impact of its discipline.

2.2.1. Patient outcomes in medicine

The systematic use of ‘patient outcomes’ to evaluate health care began in the period of the Crimean War, when Florence Nightingale recorded and examined conditions of care for military patients and looked at how those conditions affected patients [16]. From that time, analysis of patient outcomes has occurred periodically, usually centered on different disciplines and often targeting medical treatment [17]. Initially, patient outcomes were treated as ‘clinical end points (symptoms and signs, laboratory values, death), functional status (physical, mental, social role), general well-being (health perceptions, energy, fatigue, pain, life satisfaction), or satisfaction with care (access, convenience, financial coverage, quality, general)’ [18]. Donabedian defined patient outcomes as changes in the present and future health conditions of a patient that could be linked to previously provided health care [19] while Lohr expanded the concept of patient outcomes beyond the traditional ‘five Ds’ (death, disability, dissatisfaction, disease, and discomfort) [20]. Patient outcomes in medicine can be seen as a complex construct that can be measured directly and indirectly over different periods of time and can include factors related to functional status, quality of life and health.

2.2.2. Patient outcomes in nursing

From the mid-1960s, patient outcomes were used to evaluate nursing care quality. ‘Outcomes that are sensitive to nursing are those that are relevant, based on nursing scope and domain of practice and for which there is empirical evidence linking nursing inputs and interventions to outcomes’ [21]. McCormick stated that patient outcomes identified as salient for nursing were normal fluid hydration, mobility, and absence of decubitus ulcer and injury to the mucosal membrane [22]. A framework generated by Gillette and Jenko suggested that the measurement of patient outcomes should include patient or family education, facilitation of self-care, symptom distress management, patient safety, and patient satisfaction [23]. Brooten and Naylor listed patient outcomes as ‘functional status, mental status, stress level, satisfaction with care, caregiver burden, and cost of care’ [24]. According to the American Nurses Association (ANA), nursing variables that contribute to patient outcomes are the presence or absence of pressure ulcers, nosocomial infections, and patient falls in addition to patient satisfaction with nursing care, pain management, educational information, and overall care [25].

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