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Who cares? A critical discussion of the value of caring from a patient and healthcare professional perspective

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KEYWORDS

Orthopaedic;
Caring;
Behaviours;
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team

Abstract Background: This study was undertaken in order to discover and illuminate the essential caring behaviours valued by both patients and staff in an orthopaedic setting within a district general hospital in the United Kingdom.

Objectives: This descriptive study was undertaken in order to acquire a greater understanding of perceptions of caring from both patient and orthopaedic healthcare professional perspectives.

Methods: A sample of 30 patients and 53 healthcare professionals consisting of doctors, nurses, physiotherapists and occupational therapists were asked to complete the Caring Behaviours Inventory (CBI) questionnaire (Wolf et al., 1994). Data were analysed using descriptive and inferential statistics.

Results: The findings revealed both similarities and differences relating to the importance of positive caring behaviours exhibited during caring interactions. Healthcare professionals working in the orthopaedic setting acknowledged the value of similar positive caring behaviours to those of the patient group but ranked the importance of these differently.

Discussion: Several important insights into perceptions of caring have been gained. These relate to an overall understanding of the caring behaviours that are considered of importance to patients and healthcare professionals; the differences that exist between the caring perceptions of both groups and the factors which influence these perceptions.

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Editor comments

This important study is the first to investigate the nature of caring behaviours specifically from the perspective of both patients and healthcare professionals in the orthopaedic setting. As such this work is likely to become 'seminal'; it might well be the first in a line of studies or discussions considering this central aspect of care in this speciality. It fundamentally demonstrates that both patients and care staff, nurses in particular, have a similar idea about what caring means and which aspects of it are the most important. What this does for the reader is to highlight the most fundamental aspects of caring that are central to good care experience – allowing practitioners to focus clearly on these as they develop and enhance their relationships with those receiving care. These are the aspects of care most likely to be rewarding for both parties.

JS-T

Introduction

Caring is a universal phenomenon (Leininger, 1988a, 1988b) that influences the way we think, feel and act and is the focus of debate worldwide. Studied since the days of Florence Nightingale (1820–1910) and reflected in the literature are numerous theoretical opinions in the search for a comprehensive understanding of caring in the health experience of human beings (Newman et al., 1991). All human beings have a perception of caring which has evolved from their own personal experiences of caring relationships (Watson, 2008).

Professional caring has been described by Hawthorne (2005) as a unique relationship centering on responsibility and trust between a healthcare professional, such as a nurse or doctor and their patient. Caring encompasses many qualities such as compassion, kindness, thoughtfulness, gentleness, consideration, concern, empathy, sympathy and love. The way in which caring is conveyed through the actions and behaviours of others is said to be predetermined (Leininger, 1988a, 1988b). Caring that is evident in professional practice can be dependent upon variables such as staffing levels, busy ward environments and individual patient need (Ball, 2012; Needleman et al., 2002; Royal College of Nursing, 2010). Caring is unique to each and every individual and it is the right of that individual to define caring based upon physiological, psychological, social and spiritual needs. By investigating what caring means to patients and healthcare professionals it is possible to expose the caring behaviours that are desired and valued during caring interactions. This paper reports findings obtained from a questionnaire used to elicit responses from the multidisciplinary orthopaedic team and patients admitted to hospital for either elective orthopaedic procedures or as a result of orthopaedic trauma. The research findings reported here are part of an ethnographic study that explored perceptions of care and caring in the orthopaedic

setting of a district general hospital in the United Kingdom.

Background

Orthopaedics is a specialist art and science of caring. Its uniqueness lies in its objective to restore mobility and prevent functional disability and decline (Davis, 1997). Orthopaedic disease and injury can affect patients socially, functionally and psychologically. Due to the diverse nature of orthopaedic conditions there is a need to view patients as holistic entities taking into consideration their beliefs and expectations of care and caring (Cameron and de Araújo, 2011; Clarke, 2003; Esoga and Seidl, 2012; Footner, 1998; Jackson, 2003; Tierney, 2004).

The number of studies reported in the literature relating to patients' perceptions of care and caring with the multi-professional orthopaedic team varies as to its focus. A literature review was conducted using the databases Web Science, PubMed, CINAHL, British Nursing Index and ERIC. Keywords used included care, caring, humanistic, ontological, ethical and feminism. All synonyms and similar words were connected by the use of conjunctions such as 'or' and 'and'. Within this search orthopaedic patients' perceptions appeared in association with satisfaction (Arslanian, 2001; Berg et al., 2007; Davis and Bush, 2003; Fielden et al., 2003; Flynn, 2005; Gurdogen et al., 2015; Şendir et al., 2012), individualism in care (Suhonen et al., 2010a; Tekin, 2011), quality (Kneale and Knight, 1997), perioperative care (Gustafsson et al., 2010), nursing care (Berg et al., 2007; Kalafati et al., 2009; Land and Suhonen, 2009; Lee et al., 2007; Love, 1996; Suhonen and Leino-Kilpi, 2010; Suhonen et al., 2008, 2010b; Watters, 2009; Zhao and Akkadechanunt, 2011), emergency trauma care (Baldursdottir and Jonsdottir, 2002; Muntlin et al., 2006), pre-assessment (Aquilina and Baldacchino,

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