

Survey to Determine the Pre- service Student Nurses' Perspective of Quality Nursing Care at Rusangu University-Lusaka Campus

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Abstract

*The quality care concept in the health care delivery system continues to remain elusive and subjective despite many theories and models of nursing care provision that were developed many decades ago. Those endeavoring to understand and engage in quality improvements require an in-depth understanding of the various views from key stakeholders of the health care services. This particular survey focused on the aspect of nursing care recipients (novice student nurses) that were particularly engaged to solicit their views on the quality of the current nursing care services in the Zambian health care institutions. Respondents expressed their views as experienced in different institutions where they were attended to at one point in time. **Aim:** The study aimed at determining the novice student nurses' perception of quality nursing care. **Design:** Purposive sampling of pre-nursing students was done to identify and select the appropriate sample to constitute the study. The total number of students sampled was sixteen and only eight returned the questionnaires. The apparently apathetic low response by the respondents could be attributed to the coinciding of the data collection and the end of term final examinations. **Tools:** A self-administered structured questionnaire was utilized to collect data. **Ethical considerations:** Permission was sort from Rusangu administration to conduct this study and an informed consent was given to each participant to sign before engaging them in the study. The purpose and objectives of the study were explained to the participants before carrying out the study. **Results:** Results indicated that 62% of the respondents did not approve of the quality of care they received from the nurses during their encounter with the health care system. The respondents listed elements which they thought could have constituted their care at the time of their last encounter with the nursing services at the hospital. They preferred to be treated in a holistic and individualized approach characterized by respect, love, kindness, good communication, trusting relationship, good interpersonal relationship, in a clean environment and being nursed by staff who engaged in continuing education. **Recommendations:** Study should be conducted at a larger scale to enable generalization of results and there was need to conduct a comparative study of both the health care provider's and client perspective of quality care provision so that the two views would guide the development of a care framework.*

Keywords: Quality, nursing, caring, novice, perspective.

Introduction

Caring represents individual's expression of concern for another in need and nursing is synonymous with the term. True caring emanates from the carer's inner drive, which is expressed in actions and utterances. Caring could also be viewed as a powerful communication tool between the recipient of care and the care provider. Many theories have been developed and these revealed complex dynamic interpretations of the concept of caring. Gonzalo., (2011), analyzed caring as was viewed by Nightingale as having a focus on the patient's external and internal environment. True to these observations, environment still and will continue playing an important role in sustenance of health at both individual and society levels. Many disease outbreaks, like cholera and other diarrheal diseases, tuberculosis and various communicable diseases result from poor external environmental conditions. Also, according to Nightingale, environment included the patient's inner experience which was defined by the intrinsic factors that were as a result of the disease process and this could be regarded as the main reason why the patients seek medical care.

Gonzalo further described the usefulness and applicability of Orem's self-care nursing concept to be applicable to both novice student nurses and advanced nurses as a result of the use of simple language which could easily be understood by the novice students. However, it was still noted that the theory recognized the importance of helping individuals to attain healthful living where they were not able to achieve. Watson (2010)'s caring concept identified four core principles of the caring theory, which was revolving around agape (selfless) love, authentic presence of the caregiver, care giver driven by spiritual values, manipulation of environment and ability to prepare patient to accept inexplicable situations. The main focus of Watson's theory was based on interpersonal interactions and expressions, driven by religious beliefs, patient's environment and ability of the caregiver to prepare the patient to accept any situation that would result from their illness. Wilkes., and Wallis., (1998), identified that the perspective of student nurses' perception of caring was poorly documented and this study described a construct of caring as was perceived by pre-registration student nurses which led to the creation of a model of caring for nurses, based on the student nurses' perception. This model delineated compassion as the primary variable that drives caring and was executed through effective communication, provision of comfort, competence, clear conscience, confidence and courage. Communication was observed as the key medium for expression of the caring actions.

Purpose

To identify the caring perception of a novice student nurses and their contribution to the caring concept

Objectives

1. Determine elements of quality nursing care based on the perspective of the novice student nurses.
2. Utilize the identified elements of caring in the feature development of a nursing care model for Zambia.

Research questions

1. Is the novice student nurses' perspective of quality nursing care beneficial in the formulation of a nursing care model for Zambia?

Methodology

A descriptive research method was used to depict the perceptions of quality nursing care by the novice student nurses at Rusangu University – Lusaka Campus.

Purposive sampling method was utilized to select the pre-service nursing students who participated in the study.

Target population

The target population comprised of all the pre-service nursing students recruited at Rusangu University, Lusaka campus and were present at the time of data collection.

Accessible population

The population of interest was all the pre-service nursing students who were in session during the time of conducting the study.

Sampling method

Purposive sampling was utilized to select all the pre-service nursing students who were in session in the first quarter of 2018, at Rusangu University, Lusaka campus. Check lists were used as a sampling frame to identify pre-nursing students and 16 were selected to participate in the study.

Data collection method

Self-administered structured questionnaire was utilized to collect data from the sampled students.

Ethical consideration

Written permission was sought from the Rusangu administration to allow the investigator to recruit students as respondents in the study. An informed consent was signed by all the participating students and all of them were advised not to disclose their names or any identifier number on the questionnaire.

Data analysis

The data was analyzed using a data master sheet and excel software package and was presented in frequency tables, histograms and pie charts. Descriptive statistics were utilized to explain the results of the study.

Presentation of results

Table 1. Demographical variables

VARIABLE			FREQUENCIES	PERCENTAGES
Sex	Male		3	38
	Female		5	62
Total			8	100
AGE	18-21		3	38
	22- 25		5	62
	26-29		0	0
	30>		0	0
T/OTAL			8	100
MARITAL STATUS		Single	8	100
		Married	0	0
		Divorced	0	0
		Cohabiting	0	0
		other	0	0
Total			8	100
LEVEL OF TRAINING	Quarter 1			
	Quarter 2		3	37.5
	Quarter 3		1	12.5
	Quarter 4		2	25
	Quarter 5		0	
	Quarter 6		0	
	Quarter 7		0	
	Quarter 8		1	12.5
		No response	1	12.5
Total			8	100
Started majoring		Yes	8	100
		No	0	0
Total			8	100
Is nursing first choice major		Yes	8	100

	No	0	100
Total		8	100

Majority of the respondents were females (62%) and most of the respondents were in the age category of 22-25 years of age (62%). All the respondents were single and had not yet started their nursing majors (100%), 38% were in their second quarter of pre-nursing courses, while 25% were in quarter four of their studies. At the time, all the respondents were still doing their pre-nursing courses and indicated that they were all planning to major in nursing.

Perceptions about nursing

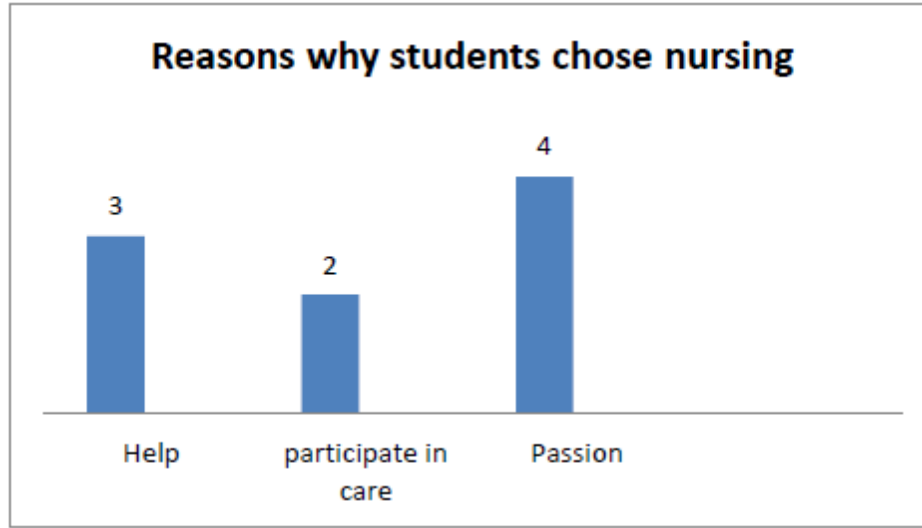


Figure 1. Presents reasons why respondents chose to study nursing (n=8)

Majority of the respondents (50%) indicated that they chose to study nursing because they were passionate about the profession.

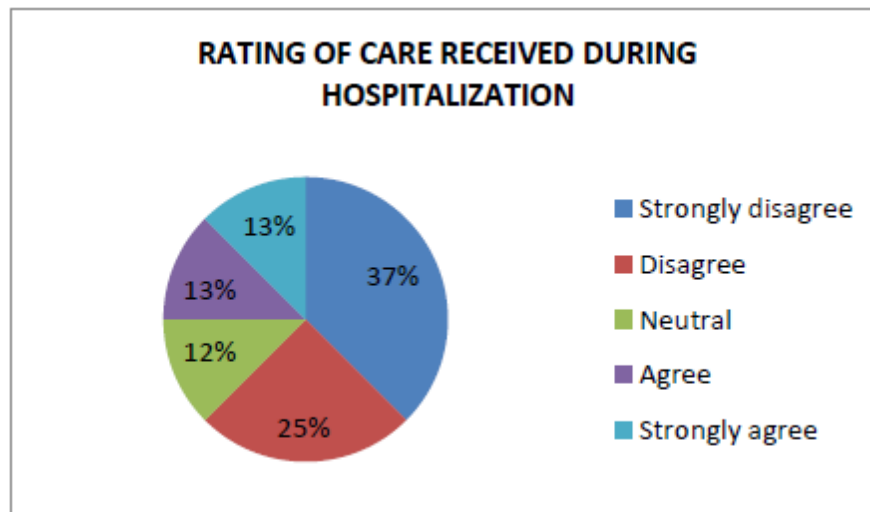


Figure 2. Shows the rating of the care received by respondents the time they were sick (n=8)

Figure 2 results indicate that the majority of the respondents did not approve of the care they received during their hospitalization. The results show that 37% strongly disagreed with the care they received, 25%

disagreed while 13% strongly agreed with the care they received and another 13% agreed with the care received.

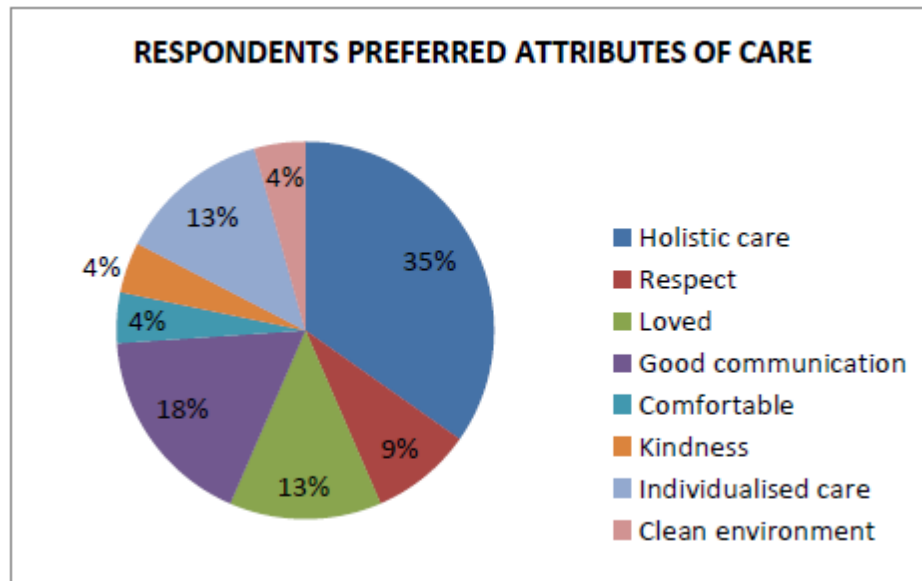


Figure 3. Display of respondents' description of preferred way of being cared for (n=8)

Figure 3 shows respondent's preferred caring attributes and 8 attributes were identified.

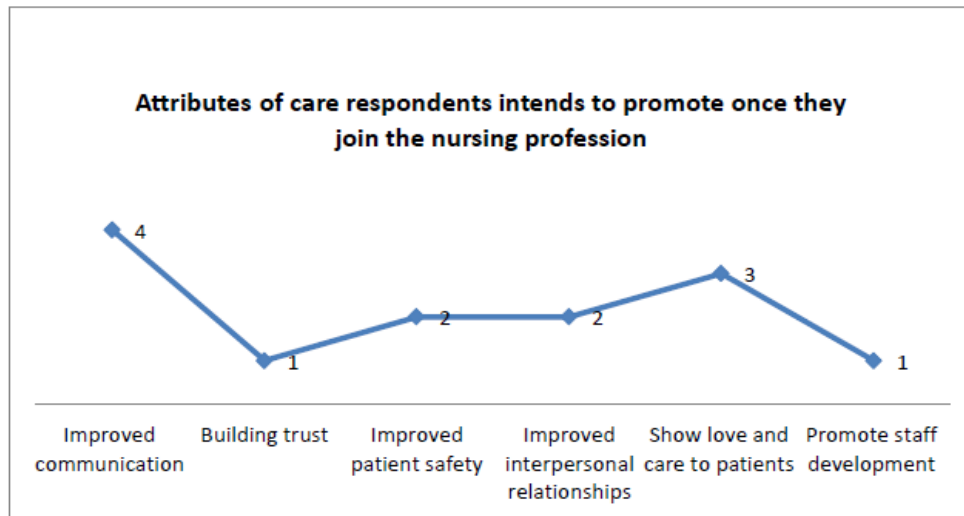


Figure 4. Proposed attributes respondents intend to introduce in the nursing profession.

Figure 4 represents respondent's ideas of quality nursing care and six attributes were proposed as an important attribute for quality nursing care provision.

Discussion of findings

Demographic data revealed that majority of the respondents were females (62%), a universal trend of having more females in the profession than males, as an affirmation of (Nursing times 2008 – 3 March)'s assertion that the nursing profession was viewed as feminine. Most of the respondents were in the age category of 22-25 years of age (62%). All the respondents were single and had not yet started their nursing majors (100%), 38% were doing their second quarter, while 25% were in quarter four of their studies. At the time, all the respondents were still doing their pre-nursing courses and indicated that they were all planning

to major in nursing. The study population was mostly school leavers who have had no experience of the nursing profession. The investigator's desired study population of novice student nurses was achieved.

Majority of the respondents (50%) indicated that they chose to study nursing because they were passionate about the profession. Results also indicated that 62% of the respondents did not approve of the quality of care they received from the nurses during their encounter with the nursing profession. Again, this was to the advantage of the investigation, so that their dissatisfaction would be capitalized to get their preferred way of providing nursing care.

Although the respondents had not yet started majoring in nursing, they presented ideas of what they thought would constitute quality nursing care. Based on their experience with the hospital care, which over 60% disapproved, (as indicated in figure 2), respondents preferred to be treated in a holistic and individualized approach characterized by respect, love, kindness, good communication in a clean environment. Some of the aspirations of these respondents were consistent with the findings of (Elewa et al 2016).

Elewa et al (2016) s' descriptive study of nursing interns' perceptions of patients' rights and advocacy, observed that respectful and nondiscriminatory service was highly vital in nursing care provision. Effective communication with health care staff was another element which was considered necessary during care provision. The investigators also recommended that hospitals should embark on disclosure of patient's rights, creating systems for patients to submit their complaints and collaboration of hospital and faculty of nursing to provide regular in- service education. The faculty and clinical instructors were admonished to lead by example in upholding patients' rights and doing the patient advocacy. The commonality of the two findings is on the demand for patient respect, providing patient information and continued education of care givers. The investigator viewed these attributes as a vital ingredient of holistic quality nursing care provision. If providers respect the patient, everything would automatically fall in place; thus, the patient would be informed of their ailment, proposed course of action and their views would be solicited (provider/patient communication). Individuals also would by design show love and kindness towards those they respect and would strive to ensure they were taken care of under good conditions (clean and well-ventilated environment). This was exactly one of the major findings of this study and supported by (Elewa et al 2016).

The respondents' desired quality nursing care expressed in figure 4 of this study included effective patient nurse communication, trusting relationship, good interpersonal relationship, love and care and continuing education for staff. Effective communication and good interpersonal relationships consistently emerged in other studies too; (Forsberg et al 2015), cross sectional descriptive study, identified patient communication as an important aspect of quality patient care as viewed from the perspective of patients. Williams (1998), revealed that patients valued interpersonal interactions to constitute quality of care. Although somewhat, (Ryan C., et al 2017) in the study of nurses' perception of quality nursing care identified many themes which mainly were different from the perceptions of patients' views of quality nursing care, the need for effective communication and rapport-based care, still emerged as one of the important aspects of quality nursing care. The findings of these studies consistently identified effective communication and interpersonal relationship as an important constituent of quality nursing care provision viewed both from the patients' point of view and the nurse.

Levine et al (2012), developed a 9-category classification of major behaviours that were considered critical in defining quality care based on the perspective of the patient and clinician. In this study, "almost all clinicians and patients agreed that clinical skill, rapport and health-related communication behaviors were key elements" of quality health care. Additionally, patients expressed satisfaction of care if they were engaged in care, treated with politeness and respect.

Although many studies have consistently reported variations in the interpretations of quality nursing care, the key elements in most of them remain interrelated. A combination of cognitive ability (intellectual ability to treat ailments), motor skills exhibition (performance of required tasks) and affective responses (exposition of positive attitudes towards patients) from the providers, constantly imparts description of quality care.

Reverential care, promptness in action, sharing information, competent skill performance (Ayub R., et al 2015; Izumi et al 2010), were key components of patient expectations of quality care.

Conclusion

All the respondents indicated that they have had an exposure to the health care system before, as patients and over 60% expressed dissatisfaction with the type of care they received. In this survey 8 elements were identified as preferred attributes of care by the respondents. These included respect, holistic care, love and good communication, comfortable, kind, and individualized none discriminatory care in a clean environment were viewed as key requirements of satisfactory nursing care.

Recommendations

1. Nursing professionals should be engaging clients in planning for their care
2. Development of nursing care strategies should be an ongoing activity because clients perceive care differently.
3. Health care systems, should continuously develop systems and strategies of care that would suite clientele of the given time and era.
4. Health care systems should no longer perceive patients as passive recipients of health care services – their views should form the basis for care planning

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