

Nurses' Attitude towards Nursing Process at Public Tertiary Care Hospital Lahore

Shazia Niaz^{1*}, Afsar Ali², Ms. Roma Bhatti²

¹Post RN BSN Student, National College of Nursing, Lahor, The University of Lahore, Pakistan

²Nursing Instructor, National College of Nursing Lahore, The University of Lahore, Pakistan

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*Corresponding author

Shazia Niaz

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Abstract: Nursing Process is a process used to prevent, identify and treat potential or actual health problems & promote wellness (Carlson, 2010). Regardless of nurse knowledge on nursing process, certain features limit the capability of nurses to implement it in their practice, including lesser time, patient volume high, patient turnover. To assess the Nurses' attitude towards the nursing process in a public tertiary care hospital Lahore. Cross-sectional descriptive design was used to evaluate the attitude of nurses towards nursing process among clinical nurses working in Mayo Hospital. Sample size was selected by convenient selection and a sample n=150 staff nurses from medical, surgical and emergency ward were selected. A well-structured questionnaire with closed ended Likert scale is adopted from the previous studies. "Nurses' Attitude to Nursing Process" Prideaux, 1991. This questionnaire was distributed among clinical nurses of medical, surgical and emergency ward in Mayo hospital. Data was analyzed through SPSS version 21 is statistical computer software for data analysis. The findings reveals that majority of the participants 78.76% were having negative attitude towards the nursing process, having attitude score of 75% or above while 21.33% of the participants had positive attitude towards the nursing process and got attitude score of above 75% score. Overall the attitude of nurses was not positive and majority had negative attitude, which need special attention.

Keywords: Nurses', Attitude, Nursing process

INTRODUCTION

Attending different hospitals in Lahore it has been observed that the nursing process which is the heart and soul of professional nursing is somewhat missing or diminishing in the clinical practice. Nursing has a holistic care system which has set standards of care that need to be followed for maximum positive outcome and following the nursing process this can be achieved. Our nurses are facing a lot of hurdles in implementing the nursing process which is resulting in nursing care compromise. There have been many authors in history who has emphasized on the nursing process Ida Jean Orlando defines in her nursing process theory principles of an effective interaction with the patient that lead to holistically effective interventions & likely to positive outcomes [1]. In Orlando's views it is not sufficient that the nurse does what she/he thinks is best for the patient. The theory presented by Orlando has been tried in numerous health care settings & the results support the implementation to practice in different nursing fields.

The nursing process is a chain of set steps designed for nurses to deliver holistic care which is goal-oriented method. Nursing process provides a

framework to nursing care that improves the care quality. The nursing process contains significant phases, Assessment, Diagnose, Outcome, Planning, Implementation, Rationalization & Evaluation. Lydia Hall was the very first individual to present the concept of 'nursing process' into nursing profession in 1955 while addressing a group of young nurses in New Jersey [2]. The nursing process is defined as the theory of how nurses organize the individuals, families and communities care [3]. In 1975 The nursing process was incorporated into the basic syllabus for basic nurse teaching by the General Nursing Council the predecessor body to the United Kingdom Central Council of Nursing, Midwifery and Health Visiting (UKCC) and the current Nursing and Midwifery Council which as the regulatory body for nursing in the United Kingdom, sets standards for basic nursing education. At the same time the government's department of health directed all National Health scheme organizations to appoint "nursing process facilitators," to introduce the concept into nursing practice. A research conducted in African countries Nigeria including found nurses usually approve on the benefits of the nursing process but the thing is it is not commonly in practical use. The points identified by the

research included, failure of Nurse Leaders to motivate others, its time-consuming nature, negative attitude and shortage of staff [4].

Nursing Process is a process used to prevent, identify and treat potential or actual health problems & promote wellness [5]. Regardless of nurse knowledge on nursing process, certain features limit the capability of nurses to implement it in their practice, including lesser time, patient volume high, patient turnover. When nursing services are contributing the large percentage of the overall quality of healthcare, nursing process implementation will lead to positive patient outcome and patient satisfaction in our institutions. Here in Pakistan there is sheer need for the implementation of the nursing process to holistically improve the nursing care.

Wilkson further stated that nursing process is patient oriented, goal oriented, dynamic and cyclic, universally applicable, problem oriented and cognitive processed [6]. Kozier and Erb [7] stated that the nursing process is continuous for every patient problem and care. Nursing process is a worldwide concept that forms the foundation of nursing as a profession. Its Use of nursing process in hospitals mostly is lagging behind despite all the efforts of nursing professionals to implement its use [8]. Nursing has a serious influence in healthcare reform & demands for quality, safety, patient centric, accessible, and affordable healthcare system [9]. For these outcomes to be delivered, nurses, from the Director Nursing to the ground level staff nurse, must recognize how nursing practice must be different to carry out the expected level of quality care & passionately become involved in this change [10].

The nursing process is a set framework that all nursing professional use to solve problems & provide high standards of care across settings & populations [11]. Professional nursing is both science & an art, the application of the nursing process is the mixing of two which has proven to be a valuable tool that is transforming nursing practice as well as patient outcome worldwide. Therefore, experts of nursing must keep well-informed with good scientific understanding of the task applied and must apply scientific knowledge in every task to be done.

It has been revealed that nurses' attitude regarding nursing process has very important role in delivering quality nursing care. The nurses opinions improved nursing care plan and thus has played essential leading role in the improvement of standard nursing care [12].

In another study, the attitudes of nurses were assessed on a 20 item agreements based questions. For

different units, different attitude score was measured, but within units based on education no statistical difference of attitude was found. It was also found that some kind of educational programs were beneficial in developing positive attitudes towards the implementation of nursing process [13].

In another study, overall, participants had knowledge of the nursing process, along with having very positive attitude for the nursing process and its diagnosis and implementation. More positive attitudes among nurses is said to be associated with the higher education among nurses [14].

According to a study, there was no any difference of attitude among the nurses towards the nursing process. The study found in conclusion that training among nurses was effective in improving nursing process and utilization but not on the attitudes towards the nursing process [15].

According to another study, nurses working in stressful areas and environment were 99% less likely implementing as compare to nurses working in good environment. The nurses with an educational level of BSc. Degree were 6.972 times more likely to implement the nursing process than those who were diploma qualified [16].

AIMS OF THE STUDY

To assess the nurses' attitude towards the nursing process at Mayo hospital Lahore Pakistan

SIGNIFICANCE OF THE STUDY

The nurses' attitudes usually have implications in clinical, educational and administrative nursing practices. Moreover the nurses' attitude also affects the client's behavior to care, support from colleagues and also the work situation and environment at hospitals. It was therefore relevant and essential to assess the attitudes of nurses regarding nursing process.

METHODS

SETTING

This Study was conducted out at Mayo Hospital which is located near old Anar Kali Lahore Pakistan. Staff Nurses of this tertiary care hospital are well skillful. Patient came to this hospital from different areas of Lahore and even outside of Lahore. In this study data was collected from medical, surgical and emergency wards of the hospital

RESEARCH DESIGN

A descriptive cross sectional survey design was used. Cross Cross-sectional descriptive design was used to evaluate the attitude of nurses towards

nursing process among clinical nurses working in Mayo Hospital.

POPULATION

Data was collected from different nursing staff who are present in medical, surgical & emergency wards of Mayo Hospital in Lahore

SAMPLING

Sample size is by convenient selection. 150 staff nurses from medical, surgical and emergency ward in Mayo hospital

RESEARCH INSTRUMENT

In this study well, adopted questionnaire was used with closed ended question as per Likert scale. This questionnaire was adopted from "Nurses' Attitude to Nursing Process" [12]. This questionnaire consists of many questions which are based on demographic, social, institutional and cultural factors. Questionnaire consists of 2 parts. First part is based on the demographic data of the patients such as name, gender, marital status and education, etc. Second sLikert scale attitude based questions from strongly disagree to strongly agree.

DATA GATHERING PROCEDURE

The questionnaire was distributed to the participants in printed form where they answered all the questions according to their own understanding. A time of about 20-30 minutes was given to fill the

questionnaires. Then the filled questionnaires were collected.

METHODS USED TO ANALYZE DATA

Data was analyzed through SPSS version 21 is statistical computer software for data analysis. Cross sectional analytical study will be done on frequencies, proportion tables, charts, graphs and tables were found as below in the result section.

STUDY TIMELINE

The data was collected from February, 2018 to April, 2018.

ETHICAL CONSIDERATION

Ethical principle was performed during research study. Permission was taken from the Ethical committee of National Hospital Collage of Nursing. I took permission from the MS of Medical, Surgical and Emergency Departments of Mayo hospital. Gave complete information to the participant related to research. It was made sure that no harm to be given to the participant. Study is beneficial. All patients had open opportunity to participate in research. No one was forced to participate in research. Informed consent was signed by nurses. Before signing consent, nurses were informed about purpose, methodology, risk and benefits of investigation.

RESULTS

PROFILE OF THE RESPONDENTS

Table-1: Demographic frequency

Variables	Number (n)	Per cent
Gender		
Male	03	02
Female	147	98
Marital Status:		
Single	120	80
Married	30	20
Age:		
18-25 years	94	62.7
26-35years	41	27.3
35-50 years	15	10
Above 50years	00	00
Education:		
Nursing Diploma	134	88.5
BSN/PRN BSN	15	10
MSN/MPH	2	1.5

Table-1 presents that there were only 25 male participants while the remaining 98% were female study participants. From the study participants, 80% of the respondents were single, while remaining 20% were married. Furthermore 62.7% of the study participants were from age group 18-25 years, 27.3% of the study

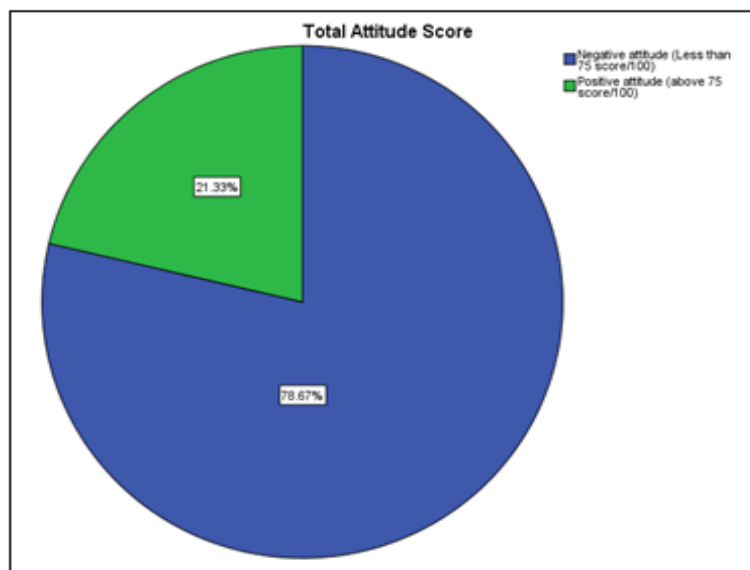
participants having age between 26-35 years, and 10% were age group 35-50 years. From the participants, 88.5% were with nursing diploma/Specialization, 10% were BSN or post RN BSN and 1.5% of the participants were MSN or MPH.

Table-2: variables of Awareness about Hospital Waste Management

S. NO	Statement	Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		N	%	N	%	N	%	N	%	N	%
1. 1	The nursing process improves nursing care	17	11.3	5	33.3	2	1.3	49	32.7	77	51.3
2. 2	The nursing process involves too much paperwork	4	2.7	31	20.7	25	16.7	51	34	39	26
3. 3	The nursing process is too time consuming	22	14.7	29	19.3	15	10	55	36.7	29	19.3
4. 4	The nursing process improves awareness of patient needs SA	20	13.3	5	3.3	22	14.7	59	39.3	44	29.3
5. 5	The nursing process is a waste of time	55	36.7	34	22.7	14	9.3	29	19.3	18	12
6. 6	The nursing process can be used in any area	7	4.7	23	15.3	36	24	43	30	39	26
7. 7	The nursing process is an elaborate Kardex system	17	11.3	16	10.7	48	32	42	28	27	18
8. 8	There is not enough time to use the nursing process	28	18.7	38	25.3	21	14	37	24.7	26	17.3
9. 9	Priorities of care are easy to identify using the nursing process	7	4.7	9	6	17	11.3	60	40	57	38
10. 10	The nursing process works well in practice	10	6.7	17	11.3	21	14	50	33.3	52	34.7
11.	The staff will never accept the nursing process	35	23.3	32	21.3	16	10.7	38	21.3	29	19.3
12.	I am willing to be involved with the nursing process	9	6	10	6.7	23	15.3	61	40.7	47	31.3
13.	The Kardex system of nursing records is unsatisfactory SA	15	10	37	24.7	51	34	20	13.3	27	18
14. 18	I like the idea of the nursing process	6	4	6	4	16	10.7	60	40	62	41.3
15.	I am now ready for the nursing process	13	8.7	9	6	15	10	71	47.3	42	28
16.	The nursing process should be used by qualified nurses only	11	7.3	18	12	49	32.7	39	26	33	22
17.	I am fed up with hearing about the nursing process	24	16	55	36.7	28	18.7	28	18.7	15	10
18.	Patients will not like the nursing process	26	17.3	18	12	53	35.3	32	21.3	21	14
19.	I am convinced the nursing process will work	8	5.3	17	11.3	12	8	76	50.7	37	24.7
20.	Its introduction will cause problems	44	29.3	31	20.7	33	22	26	17.3	16	10.7

The Below table-2 shows that in response to a question that the nursing process improves nursing care, 11.3% study participants strongly disagreed, 3.3% participants Disagreed, 1.33% of the participants were uncertain about it, 32.67% study participants agreed to the statement and 51.33% participants strongly agreed with the statement. Result also shows that 2.66% stated with strongly disagreement that nursing process involve too much paper work, 20.67% participants disagreed with this, 17% were uncertain, 34% study participants agreed to the statement that there is too much paper work and 26% respondents strongly agreed. On a statement that nursing process is too much time consuming, 14.67% strongly disagreed, 19.33% participants disagreed with it, 12.7% were uncertain, 36.7% agreed to the statement and 19.33% participants strongly agreed to the question. On a question that nursing process brings awareness among patients, 13.33% strongly disagreed, 3.33% disagreed with it, 14.67% participants were uncertain, 39.33% participants agreed to the statement, and 29.33% strongly agreed that nursing process bring awareness. On nursing process is waste of time, the responses were as below, 36.7% strongly disagreed, 22.67% disagreed with it, 9.33% remained uncertain, 19.33% agreed to the above statement and 12% strongly agreed with the given statement. To a question that the nursing process is being used everywhere, 4.66% strongly disagreed, 15.33% disagreed to the statement, 24% were uncertain, 30% of the study participants agreed and 26% study participants strongly agreed with the above statement. To a question that Nursing process is elaborate kardex system, 11.33% strongly disagreed, 10.67% participants disagreed to it, 32% participants were uncertain, 28% participants agreed to it and 18% respondents strongly agreed to the statement. To a question that time is not enough for using nursing process, where in response 18.67% respondents strongly disagreed to this, 25.33% participants disagreed, 14% remained uncertain, 24.67% participants agreed with it and 17.33% strongly agreed to the above given statement. To another question that using nursing process can make it easy to prioritize problem, 4.66% participants strongly disagreed, 6%

disagreed to this, 11.33% remained uncertain about it, 40% study participants agreed to the statement and 38% strongly agreed that priority can be made easy. When they were asked if the nursing process works good in clinical practice, where 6.66% participants strongly disagreed, 11.33% participants disagreed, 14% study participants remained uncertain, 33.33% participants agreed to the statement and 34.67% strongly agreed. Another statement was asked if the staff never accepts nursing process, where 23.33% Strongly disagreed, 21.33% disagreed to it, 10.67% remained uncertain, 25.33% agreed to this and 19.33% strongly agreed with this statement. To a question staff involvement in the nursing process, 6% strongly disagreed to it, 6.66% participants disagreed to it, 15.33% participants were uncertain, 40.67% participants agreed to it and 31.33% respondents strongly agreed to the statement. To a question that Kardex system of nursing process is not satisfactory, where in response 10% respondents strongly disagreed to this, 24.67% participants disagreed, 34% remained uncertain, 13.33% participants agreed with it and 18% strongly agreed to the above given statement. To another question that nurses like the nursing process, 4% participants strongly disagreed, 4% disagreed to this, 10.67% remained uncertain about it, 40% study participants agreed to the statement and 41.33% strongly agreed that nurses like the nursing process. When they were asked if the nurses are now, where 8.66% participants strongly disagreed, 6% participants disagreed, 10% study participants remained uncertain, 47.33% participants agreed to the statement and 28% strongly agreed. Result shows that 5.33% stated with strongly disagreement that they are convinced that nursing process works, 11.33% participants disagreed with this, 8% were uncertain, 50.67% study participants agreed to the statement that nurses are convinced with nursing process and 24.67% respondents strongly agreed. On a statement that nursing process introduction will cause problem, 29.33% strongly disagreed, 20.67% participants disagreed with it, 22% were uncertain, 17.33% agreed to the statement and 10.67% participants strongly agreed to the question.



The findings in above pie chart reveals that majority of the participants 78.76% were having negative attitude towards the nursing process, having attitude score of 75% or above while 21.33% of the participants had positive attitude towards the nursing process and got attitude score of above 75% score.

DISCUSSION

The main findings of this current study reveals that majority of the participants 78.76% were having negative attitude towards the nursing process, having attitude score of 75% or above while 21.33% of the participants had positive attitude towards the nursing process and got attitude score of above 75% score.

According to a previous research study, no any attitude difference was found among the nurses towards the nursing process. The study found in conclusion that training among nurses was effective in improving nursing process and utilization but not on the attitudes towards the nursing process [15].

Another research found that nurses working in stressful areas and environment decrease their implementation of nursing process. The nurses with an educational level of BSc. Degree were 6.972 times more likely to implement the nursing process than those who were diploma qualified [16].

The findings of another study suggest that there was a moderately positive attitudes among nurses towards the nursing process in terms of quality care provision. Majority of the respondents indicates that nursing process bring awareness in clients' needs prioritization (Base Article).

Looking at the above literature it was found in my study that nursing process brings awareness among patients, where 39.33% participants agreed and 29.33% strongly agreed that nursing process bring awareness.

During my study, to a question that using nursing process can make it easy to prioritize problem, 4.66% participants strongly disagreed, 6% disagreed to this, 11.33% remained uncertain about it, 40% study participants agreed to the statement and 38% strongly agreed that priority can be made easy. Similarly Nursing Process is a process used to prevent, identify and treat potential or actual health problems & promote wellness [5].

According to another study, nursing process is patient oriented, goal oriented, dynamic and cyclic, universally applicable, problem oriented and cognitive processed [6]. Kozier and Erb [7] Similarly the use of nursing process in clinical settings facilitates high quality nursing care, improves client health outcomes and promotes nursing as a professional scientific discipline [17]. Furthermore, according to another study, the application of the nursing process is essential to the core of professional nursing practice [18].

LIMITATIONS

- Less sample size 20 due to which, the findings cannot be generalized.
- Time was too short, to see any prospective events or detailed associations of awareness and practices
- Convenient sampling technique was used which may have some biasness

CONCLUSION

In this research the attitude of nurses was studied towards the nursing process. It was found that

overall nurses have moderate positive attitude towards nursing process which needs further focus and support to improve the nursing care quality. Majority nurses agreed that they should be an active part of the implementation of nursing process to make it success.

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REFERENCES

1. Marilyn, E., & Parker, M. C. S. (2010). Nursing Theories and Nursing Practice: FA Davis Company. Philadelphia.
2. Adejumo, P., & Olaogun, A. (2009). Nursing Process: a tool for holistic approach to nursing care. *West African Journal of Nursing*, 20(1), 34-39.
3. Herdman, T. H. (2011). Nursing diagnoses 2012-14: definitions and classification: John Wiley & Sons.
4. Edet, A. B., Mgbekem, M. A., & Edet, O. B. (2013). Professional Nurses' Perception and Utilization of the nursing process at the University of Calabar Teaching Hospital (UCTH), Calabar, Nigeria.
5. Carlson, S. (2010). A practical approach to the nursing process. *The American journal of nursing*, 1589-1591.
6. Adeyemo, F. O., & Olaogun, A. A. A. F. (2013). Factors affecting the use of the nursing process in health institutions in Ogbomoso Town, Oyo State. *Int J Med Pharmacol Sci*, 1, 191-98.
7. Kozier, B., Erb, G., Berman, A., & Snyder, S. J. (2004). Fundamentals of nursing concepts and procedures: USA: Pearson Prentice Hall.
8. Momoh, M., & Chukwu, D. (2010). Factors that militate against the use of nursing. *J Wilolud*, 4, 6-9.
9. Garon, M. (2012). Speaking up, being heard: registered nurses' perceptions of workplace communication. *Journal of Nursing Management*, 20(3), 361-371.
10. Salmond, S. W., & Echevarria, M. (2017). Healthcare transformation and changing roles for nursing. *Orthopedic nursing*, 36(1), 12.
11. Yusof, M. A., Nor, N. M., Zain, M. F. M., Peng, N. C., Ismail, A., Sohaimi, R. M., & Zaidi, A. M. A. (2011). Mechanical properties of hybrid steel fibre reinforced concrete with different aspect ratio. *Australian Journal of Basic and Applied Sciences*, 5(7), 159-166.
12. Prideaux, G. M. (1991). Nurses' attitudes to the nursing process.
13. Bowman, G. S., Thompson, D. R., & Sutton, T. W. (1983). Nurses' attitudes towards the nursing process. *Journal of Advanced Nursing*, 8(2), 125-129.
14. Martin, P. A., Dugan, J., Freundl, M., Miller, S. E., Phillips, R., & Sharritts, L. (1994). Nurses' attitudes toward nursing process as measured by the Dayton Attitude Scale. *The Journal of Continuing Education in Nursing*, 25(1), 35-40.
15. Hallin, K., & Danielson, E. (2008). Registered nurses' perceptions of their work and professional development. *Journal of Advanced Nursing*, 61(1), 62-70.
16. Baraki, Z., Girmay, F., Kidanu, K., Gerense, H., Gezehgne, D., & Teklay, H. (2017). A cross sectional study on nursing process implementation and associated factors among nurses working in selected hospitals of Central and Northwest zones, Tigray Region, Ethiopia. *BMC nursing*, 16(1), 54.
17. Hagos, F., Alemseged, F., Balcha, F., Berhe, S., & Aregay, A. (2014). Application of nursing process and its affecting factors among nurses working in mekelle zone hospitals, Northern Ethiopia. *Nursing research and practice*, 2014.
18. American Nurses Association. (2013). *Public health nursing: Scope and standards of practice*. American Nurses Association/Nursesbooks.org.