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RESEARCH ARTICLE

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## A STUDY TO ASSESS QUALITY OF NURSING CARE BY NURSING AUDIT AMONG STAFF NURSES IN SELECTED HOSPITALS OF GANDHINAGAR

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### ABSTRACT

A cross-sectional study was conducted on a study to assess quality of nursing care by nursing audit among staff nurses in selected hospitals of Gandhinagar. The 'general system model' was used as conceptual framework. A quantitative approach with cross-sectional study design was used to achieve the objectives of the study. The sample size consisted of 50 staff nurses from selected hospitals of Gandhinagar. The non-probability convenient sampling technique was used to collect the samples. In the cross-sectional study the mean of the study was 14.12 with Standard deviation 3.98 at 0.05 level of significance. Majority of the score was under the good quality of nursing care was 27. This study therefore, offers an encouraging improvement in quality nursing care through nursing process model.

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## INTRODUCTION

Nursing care is used to promote health and to help, support and educate patient by liberating his or her own resources. The nursing care provided by nurse to deliver the quality nursing services for better patient outcome. Nursing process is a critical thinking process that professional nurses use to apply the best available evidence to care giving and promoting human functions and responses to health and illness.<sup>1</sup> Nursing audit is a detailed review and evaluation of selected clinical records by qualified professional personnel to identify, examine, or verify the performance of certain specified aspects nursing care by using established criteria.<sup>2</sup>

**Need for the Study:** Nursing encompasses autonomous and collaborative care of individuals of all ages, sick or well and in all settings. It includes the promotion of health, the prevention of illness, and the care of ill, disabled and dying people. Nursing is a profession within the health care sector focused on the care of individuals so patients may attain, maintain, or recover optimal health and quality of life. Nurses may be differentiated from other health care providers by their approach to patient care, training, and scope of practice. Basic nursing care represents the care that is recognized by patients as being the most.<sup>3</sup>

Quality of care is the degree to which health services for individuals and population increase the likelihood of desired health outcomes. Quality health services should be effective, safe, people centered.<sup>4</sup> In 2018, 1.5 million people died due to poor quality of care hospitals in the South Asian country. Furthermore, over 838 people died due to insufficient access to health care in the country during that time.<sup>5</sup> In India, According to Lancet Global Health Commission, 1.6 million Indians died due to poor quality of care in 2016, nearly twice as many as due to non- utilization of healthcare services (838,000 persons). An estimated 8.6 million deaths in low and middle-income countries every year are due to conditions treatable by health care, of which 5 million results from poor quality of care and 3.6 million from insufficient access to care. Nurse's roles from direct patient care & case management to establishing nursing practice Standards, developing quality assurance procedures, & direct complex nursing care system.<sup>6</sup>

### Objectives of the Study

1. To audit the quality of nursing care among staff nurses.
2. To find out association between quality of nursing care among staff nurses with their selected demographic variables.

SR NO	Demographic variable	Frequency (f)	Percentage (%)
1.	Age		
	a. 20-25 years	33	66
	b. 26-30 years	13	26
	c. 31-35 years	1	2
	d. >35 years	3	6
2.	Working area of staff nurses		
	a. General ward	9	18
	b. Private & semi-private ward	19	38
	c. ICU	22	44
3.	Year of experience		
	a. <1 year	15	30
	b. 1-5 years	32	64
	c. 6-10 years	1	2
	d. >10 years	2	4
4.	Qualification of staff nurses		
	a. GNM	33	66
	b. Post basic B.Sc. Nursing	0	0
	c. Basic B.Sc. Nursing	17	34
	d. M.Sc. Nursing	0	0
5.	Number of patients allotted to the staff nurses		
	a. ≤ 2 patients	23	46
	b. 3-4 patients	15	30
	c. 5-6 patients	12	24
	d. > 6 patients	0	0
6.	Duty hours at the time of data collection		
	a. 1-4 hours	32	64
	b. 5-8 hours	18	36
	c. 9-12 hours	0	0
	d. >12 hours	0	0

Frequency of mean, standard deviation of the study N= 50

QUALITY OF NURSING CARE	FREQUENCY	PERCENTAGE
Good (14-20)	27	54%
Average (7-13)	19	38%
Poor (1-6)	4	8%
Total	50	100 %

Mean and Standard deviation of quality nursing care given by staff nurses.

Group	Mean	SD	Level of significance
Staff Nurses (N=50)	14.12	3.98	0.05

#### Association with selected demographic variables among staff nurses N=50

Demographic variables	Quality of nursing care			Significance			P Value	Remark
	Good	Average	Poor	X <sup>2</sup> Calculated	df	X <sup>2</sup> Tabulated		
<b>1.Age of staff nurses</b>								
a. 20-25 years	11	18	4	9.310	6	12.59	0.156	NS
b. 26-30 years	12	1	0					
c. 31-35 years	1	0	0					
d. >35 years	3	0	0					
<b>2.Working area</b>								
a. General ward	5	2	2	3.822	4	9.49	0.430	NS
b. Private and semiprivate ward	11	7	1					
c. ICU	11	10	1					
<b>3.Year of experience</b>								
a. <1 year	1	9	4	19.995	6	12.59	0.003	S
b. 1-5 years	23	9	1					
c. 6-10 years	1	0	0					
d. Above 10 years	2	0	0					
<b>4.Qualification</b>								
a. GNM	18	11	4	0.634	2	5.99	0.728	NS
b. Post Basic B.Sc. Nursing	0	0	0					
c. Basic B.Sc. Nursing	9	7	1					
d. M.Sc. Nursing	0	0	0					
<b>5.Number of patients allotted to the nurse</b>								
a. ≤2	12	10	1	2.029	4	9.49	0.730	NS
b. 3-4	9	5	1					
c. 5-6	6	4	2					
d. >6	0	0	0					
<b>6.Duty hours at the time of data collection</b>								
a. 1-4 hours	18	11	3	0.600	2	5.99	0.741	NS
b. 5-8 hours	9	8	1					
c. 9-12 hours	0	0	0					
d. >12 hours	0	0	0					

S= Significant

NS= Non-significant

P<0.05

### Assumption

1. The nursing care will find to be satisfactory during nursing care audit.
2. There will be association between quality of nursing care among staff nurses with their selected demographic variables.

## METHODOLOGY

Research methodology indicates the general pattern of organizing the procedure for gathering valid and reliable data for investigation. The content of this chapter includes research approach and its rationale, description, of setting and population, description of sample, tools of selections, construction, description and rationale of tool, procedure of data collection, data analysis and statistically method use.

**Data Analysis:** Frequency and percentage distribution of demographic variable N=50.

The above table depicts the distribution in number and percentage of study subjects according to their demographic variables. Out of 50 samples 33% were in age group 20-25 years, 13% were in age group 26-30 years, 2% were in 31-35 years, 6% were in age group >35 years. In working area of staff nurses out of 50 samples 18% were in general ward, 38% in private and semi-private ward, and 44% were in the ICU. In Year of experience 30% were in <1 year, 64% were in 1-5 years, 2% were in 6-10 years, and 4% were in > 10 years. In qualification of staff nurses 66% were in GNM, 0% were in Post basic B.Sc. Nursing, 34% were in Basic B.Sc. Nursing, and 0% were in M.Sc. Nursing. In number of patients allotted to the staff nurses 46% staff has  $\leq 2$  patients, 30% staff has 3-4 patients, 24% staff has 5-6 patients, 0% staff has >6 patients. The table shows the comparison of mean, standard deviation among staff nurses. Among staff nurses the mean was 14.12 with standard deviation 3.98 at 0.05 level of significance. The above table revealed association between the selected demographic variable and their post test score among staff nurses. Statistical significance was calculated using the chi square test.

## CONCLUSION

The presence study assessed quality of nursing care by nursing audit among staff nurses in selected hospitals of Gandhinagar and concluded that a nursing process model is an effective method of checking quality nursing care among staff nurses.

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