NURSES' KNOWLEDGE, ATTITUDE AND PRACTICE IN THE MANAGEMENT OF ACUTELY ILL ADULT PATIENTS, IN THE GENERAL WARDS AT KENYATTA NATIONAL HOSPITAL.

THESIS SUBMITTED IN PARTIAL FULFILMENT FOR THE AWARD OF DEGREE OF MASTER OF SCIENCE (CRITICAL CARE NURSING) OF UNIVERSITY OF NAIROBI

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AUGUST, 2010
DECLARATION

I declare that this thesis is the result of my original work and that it has not been submitted either wholly or in part to this or any other university for the award of any degree.

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This is to certify that this thesis entitled “Nurses’ knowledge, attitude and practice in the management of acutely ill adult patients, in the general wards at Kenyatta National Hospital” has been submitted as part fulfilment for the award of the degree of Masters of Science in Nursing of the University of Nairobi with our approval as supervisors:

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<thead>
<tr>
<th>Acronym</th>
<th>Abbreviation/Definition</th>
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<tbody>
<tr>
<td>ABCD’s</td>
<td>Airway, Breathing, Cardiac massage and Definitive therapy</td>
</tr>
<tr>
<td>ACLS</td>
<td>Advanced Cardiac Life Support</td>
</tr>
<tr>
<td>ACN</td>
<td>Assistant Chief Nurse</td>
</tr>
<tr>
<td>AACCN</td>
<td>American Association of Critical Care Nurses</td>
</tr>
<tr>
<td>ATLS</td>
<td>Advance Trauma Life Support</td>
</tr>
<tr>
<td>BLS</td>
<td>Basic Life Support</td>
</tr>
<tr>
<td>CPR</td>
<td>Cardio – Pulmonary Resuscitation</td>
</tr>
<tr>
<td>CCU</td>
<td>Critical Care Unit</td>
</tr>
<tr>
<td>DH</td>
<td>Department of Health</td>
</tr>
<tr>
<td>DNR</td>
<td>Do Not Resuscitate</td>
</tr>
<tr>
<td>ER</td>
<td>Emergency Rooms</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
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<tr>
<td>ICS</td>
<td>Intensive Care Society</td>
</tr>
<tr>
<td>ICU</td>
<td>Intensive Care Unit</td>
</tr>
<tr>
<td>KMTC</td>
<td>Kenya Medical Training College</td>
</tr>
<tr>
<td>KNH</td>
<td>Kenyatta National Hospital</td>
</tr>
<tr>
<td>NCK</td>
<td>Nursing Council of Kenya</td>
</tr>
<tr>
<td>NHS</td>
<td>National Hospital Survey</td>
</tr>
<tr>
<td>DH</td>
<td>Department of Health</td>
</tr>
<tr>
<td>NCEPOD</td>
<td>National Confidential Enquiry into Patient Outcomes and Death</td>
</tr>
<tr>
<td>NICE</td>
<td>National Institute for Clinical and Health Excellence</td>
</tr>
<tr>
<td>NPSA</td>
<td>National Patients Safety Agency</td>
</tr>
<tr>
<td>SNO</td>
<td>Senior Nursing Officer</td>
</tr>
<tr>
<td>SONS</td>
<td>School of Nursing Sciences</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedures</td>
</tr>
<tr>
<td>SPSS</td>
<td>Statistical Package for Social Sciences</td>
</tr>
<tr>
<td>UON</td>
<td>University of Nairobi</td>
</tr>
</tbody>
</table>
OPERATIONAL DEFINITIONS

Acutely ill patient: Patient who is at high risk for actual or potential life threatening health problems also referred as critically ill (Gupta, 2005).

Adult patient: One above the age of thirteen years admitted in either the adult medical or surgical ward as used in this study

Suboptimal care: Lack of knowledge regarding the significance of findings on airway dysfunction, breathing and circulation that result in aspects of care being missed, misinterpreted and mismanaged (McQuillan, 1998)

Acute care: Acute care is a pattern of health care in which a patient is treated for a brief but severe episode of illness as a result of an accident, trauma or during recovery from trauma (Craft et al, 2002)

Patient outcome: Used in this study to refer to the positive end result/outcome of nursing interventions
ABSTRACT

Introduction: Care of the acutely ill patient has become increasingly challenging due to demands from external sources to measure the quality and appropriateness of care provided (Ridley, 1998). The more critically ill the patient is the more vulnerable and unstable he becomes, thereby requiring intense nursing care to ensure optimum care. Nurses’ knowledge and attitude towards an acutely ill patient is generally considered to be one of the basic factors contributing to the administration of a total therapeutic nursing care. Earlier studies showed that management of acutely ill patients admitted to general wards was suboptimal (McQuillan, 1998). Other studies also suggested that doctors and nurses working in general wards may not have some of the skills required to manage patients with complex needs (Chaboyer et al, 2004).

Objective: The study sought to determine nurses’ knowledge and practice on the management of acutely ill adult patients and to establish the nurses’ attitudes and perceptions on the management of these patients at the general wards of KNH.

Methodology: This was a cross sectional descriptive study conducted at KNH general wards among nurses over a period of 6 months, from January 2010 to June 2010. Quantitative data was collected using self-administered structured questionnaires while qualitative data was obtained through a focus group discussion with the subjects. Purposive sampling was used to select ten medical and surgical wards. From each of the selected wards, proportional random sampling was used to select study subjects. Qualitative data obtained was coded through content analysis according to themes, and SPSS ® software used to analyse quantitative data.

Results and Findings: From the study, it was noted that the respondents were not knowledgeable on certain aspects of care of the acutely ill patients. A majority of the nurses had not attended any critical care course (83%). Further, 32% of nurses reported not being conversant with CPR procedures for the acutely ill patients. Of the respondents who were involved in the CPR process, 12% (n = 50) reported not being conversant with the process.

Conclusion and Recommendations: It was found that majority of nurses were not knowledgeable on management of acutely ill adult patient and a significant proportion were not competent in their practice. This being the case there is need for KNH management to train and periodically update staff on basic and advanced cardiac life support courses. Further, a systematic program of orientation and continuing education/refresher program should be implemented to ensure quality care provision and sustain the interest of the nursing professionals in the practice field.
CHAPTER ONE
INTRODUCTION

1.1 INTRODUCTION

Care of the critically ill patient has become increasingly challenging due to demands from external sources to measure the quality and appropriateness of care provided (Ridley, 1998). The more critically ill the patient is the more vulnerable, unstable and complex he becomes, thereby requiring intense nursing care to ensure optimum care. Quality care provision is therefore the responsibility of every nurse and requires vigilance as well as knowledge of the principles and standards of care in the management of the acute patient.

Critical care nursing is that specialty within nursing that deals with human responses to life threatening problems. Critically ill patients also referred to as acutely ill patients are those patients who are at high risk for actual or potential life threatening health problems (Gupta, 2005).

The scope of practice in critical care nursing focuses on the professional conduct of the nurse, which is seen as a dynamic process defined by three essential components: The acutely ill patient, the nurse and the care environment, (American Association of Critical Care Nurses [AACCN], 2006).

According to Bradley (1976), the nurse's knowledge and attitude towards a patient is generally considered to be one of the basic factors contributing to the administration of a total therapeutic nursing care. Furthermore, the author explains that these attitudes are to a great extent, the result of exposure to environments, educational background, and experiences. If outcomes are to be improved, prompt, accurate assessment immediately followed by competent and efficient treatment is essential. Due to this reason, it is important to find out the nurses knowledge and attitude towards the management of the acutely ill and other factors which might influence their practices.