



A Review of Nursing Process Writing for Patient Care in Clinical Departments in 7A Military Hospital (Hochiminh City, Vietnam)

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Abstract

Overview: A cross-sectional descriptive study combining quantitative and qualitative studies was conducted in 8 clinical departments of 7A Military Hospital.

Research objectives: (1) Describe the status of the nursing procedure writing in 8 clinical Departments of 7A Military Hospital; (2) Learn the impact of nursing procedure writing at 8 Clinical departments of 7A Military Hospital. Qualitative data was collected by in-depth interviewing 08 Head nurses. Quantitative data was collected through the survey questionnaires from 101 nurses.

Results: 55.5% of nurses remembered the steps of writing the Nursing procedure in detail, 35.5% partially remembered, and 9% did not remember. In terms of attitude, 91% agreed that writing a nursing procedure was necessary, 9% supposed that it was not a matter, and no one thought that it was useless.

Keywords: Nursing Process; Care Planning; And Diagnostic Nursing

Introduction

Nursing is a profession, a separate science [1]. According to the World Health Organization, Nursing service is one of the main parts of the health service system [2]. In order to improve the quality of patient care, writing the Nursing procedure plays an essential and indispensable role. Through the writing of the Nursing Process, we discover caring issues of each patient, which help identify the problems correctly, thereby understanding the care practice based on evidence.

The nursing process (NP) is based on a theory of nursing by Ida Jean Orlando (1950) [3]. The nursing process initially consisted of 4 steps, then developed into recently five steps by Hall (1955), Jonhson (1959), and Wiedenbach (1963) [3]. In Vietnam, since the establishment of the Vietnam Nurses Association (October 26, 1990), the Nursing profession has made great progress. According

to the standard nursing curriculum, the Nursing Process included five steps: Identifying patients, diagnostic care; care planning; implement the care plan, and care evaluation [4], respectively. The nursing process is a practical part of Basic Nursing and is considered a scientific tool for nurses to plan patient caring [5]. The steps of the nursing process are closely connected. The identifying step is to systematically collect information about the patient's conditions and update it hourly and daily. The next step, care diagnosis, is to propose the caring issues in priority order related to the patient's condition. Based on the care diagnosis, the nurse sets the plan and goals to be achieved. The implementing step coordinated the implementation of treatment and care orders according to the plan, with the participation of patients. Finally, the evaluation step is to assess the progress of the conditions and record the feedback on the patient's side and provide additional information for the identification step of the following plan [6-10].

7A Military Hospital is a central hospital located Hochiminh City, Vietnam. The 8 Clinical departments of the hospital with average 5 to 10 days of inpatient stays are Department of Nephrology; Department of Internal Neurology; Department of Traumatology and Orthopedics; Department of Internal Gastroenterology; Department of Tropical Infection; Department of Ophthalmology; and Department of Emergency. Nurses in these departments also have to perform comprehensive patient care. The status of nursing process writing and its impact on the above clinical departments are the arising questions. As of recently, there have not been any published studies about this issue. To this point, we conducted this research aiming at:

1. Describe the current status of the Nursing procedure writing at 8 Departments of 7A Military Hospital.
2. Analyze the impact of writing the Nursing procedure at 8 Departments of 7A Military Hospital.

Research Method

Subjects of the research

Select the research sample on purpose: All nurses working at 8 Clinical Departments of 7A Military Hospital.

Research time

The research was conducted from June 06 to November 2012.

Research location

At 8 Departments of 7A Military Hospital:

- Department of Nephrology.
- Department of Internal Neurology.
- Department of Traumatology and Orthopedics.
- Department of Internal Gastroenterology.
- Department of Tropical Infection.
- Department of Ophthalmology and.
- Department of Emergency.

Research design

The research is a cross-sectional descriptive study, combining quantitative and qualitative research.

Data collection techniques

- Qualitative data: In-depth interviews with 8 Chief Nurses of 8 Clinical Departments in the 7A Military Hospital. Conversational interviews designed revolves around the topic of Nursing writing.

- Quantitative data: questionnaires were sent to 105 Nurses. The questionnaires were designed based on the researcher’s objectives to survey the factors such as opinion, attitudes, knowledge, and practice of writing the nursing procedure that had been taking place in 8 Clinical Departments in the hospital. The researcher informed the purposes, gave guidelines, and distributed the forms for the Nurses to fill in during the everyday briefings of the Faculties. The filled forms could be returned immediately, or at the appropriate time. The information on the forms was fully checked when collected.

Data analysis

- Quantitative data were processed by SPSS 17.0 software
- Qualitative data were processed using normal methods.

Results and Discussion

Current situation of writing nursing procedure in 8 faculties

Table 1 showed that the majority of respondents were female, accounted for 86.3%; men only accounted for 13.7%. This rate has also often seen in surveys of nurses in both domestic and foreign countries. The nurses in this study had an average age of 32.7; the youngest was 21 years old, and the oldest was 55 years old. The majority age group was 29 years old (44.1%); the 40-49 age group accounted for only 12.1%. The remaining two groups of ages 40-49 and 50 years accounted for nearly equal proportion (23.4%; 20.4%, respectively). The result showed that the Nursing staff in 8 Faculties was mostly young. However, 20.4% of the nurses were in their 50s, about to retire. Therefore, the scientific nursing approach implementation was a challenge to them.

General Information	N	Percentage (%)
Age (mean = 32.7; min = 21; max = 55)	101	100
29 years old	46	44.1
30-39 years old	23	23.4
39-49 years old	11	12.1
50 years old	20	20.4
Gender	101	100
Female	87	86.3
Male	14	13.7

Table 1: Information on age and gender of studied subjects.

Table 2 showed that the five-year working group was the majority (52.4%), and those with over 15 years of employment accounted for only 18.8%. Therefore, the number of experienced employees in 8 faculties was not high. In terms of professional qualifications, the majority of respondents had a vocational education level (68.5%), only 31.5% had college and university level. The results suggested a generally limited human resource with sufficient knowledge for improving Nursing procedures in the eight departments.

General Information	N	Percentage (%)
Qualification	101	100
Vocational School	69	68.5
College	7	7.1
University	25	4/24
Employment period	101	100
5 Years	53	52.4
6-15 years	29	28.8
> 15 years	19	18.8

Table 2: Characteristics of professional level and seniority of the study subjects.

Table 3 showed that the percentage of nurses remembering how to write the sequence of steps of NP was relatively high, accounting for 53.4%. Besides, the percentage of unclear remembering was 37.8% and completely not remember was 8.7%. This survey section suggested a correlation between the percentage of nurses remembering the theoretical knowledge of the writing of the NP and their age and employment time. The 8.7% of respondents that did not remember might fall into the group that had gotten nursing training before 1990 and had not advanced to College or University ever since.

Level	N = 101	Percentage (%)
Unsure	9	8.7
Unclear remember	38	37.8
Clearly remember	54	53.5

Table 3: Describing the extent of remembering the order of the five steps in the Nursing process.

Table 4 showed the attitude of the nurses towards the writing of the NP collected through questionnaires. Most of the respondents

believed that the writing of the NP was very necessary and timely, accounted for 91.3%; those who thought that either writing the NP or not was acceptable accounted for only 8.7%, and no one thought that it was useless. This result also partly showed that the nurses' attitude was very positive in improving the quality of patient care in general and medical records in particular.

Content	N = 101	Percentage (%)
Unnecessary	0	0
Do not matter	9	8.7
Very necessary, timely	92	91.3

Table 4: Nursing attitude towards writing the Nursing process.

Table 5 showed the results collected from the questionnaires about the awareness of writing NP. 49.5% of respondents thought of and noted about the NP in the practice of patient caring. There were 36.6% just thought of but never had acted, and 12.9% had never thought of doing that. This result was consistent with the evaluation of writing NP memorization above because 12.9% of the respondents who had never thought of writing the NPs could be the people who had been trained before the year 1990 when the Nursing curriculum did not cover the Nursing procedure writing.

Content	N = 101	Percentage (%)
Never think of it	13	12.9
Thought of, but keep in mind only	37	36.6
Thought of and noted down	50	49.5

Table 5: Nurses' awareness of writing Nursing procedures for patient caring.

Table 6 showed that a relatively high number of nurses wanted to completely change the form (45.2%); a nearly similar number of respondents requested a writing method change while keeping the format (40.9%), and only 13.9% did not want any change.

Content selected	N = 101	Percentage (%)
Do not change	14	13.9
No need to change the format but need to change writing method	41	40.9
Must completely change	46	45.2

Table 6: Survey on changing current patient caring form.

Table 7 showed that the number of the respondents wanted to be trained again on NP was very high (94.6%), only 0.9% of them did not need training, and the rest 4.5% did not care about having training or not. This result was also logical and consistent with the results of the above tables because most of the nurses had a positive attitude in improving the quality of patient care.

Content selected	N = 101	Percentage (%)
No demand	1	0.9
Does not matter	5	4.5
Need training	95	94.6

Table 7: Demand for NP writing retraining.

The impact of writing the nursing procedure at 8 departments of 7A military hospital

Most of the Chief Nurses of 8 faculties who attended the in-depth interview about the topic of NP writing responded that there were human resources shortages in most departments. There had been at least 2 - 3 nurses in each department doing unrelated works such as financial claiming for the patients, managing health insurance cards, entering doctor's orders into computers, taking medicine. Therefore the actual number of the workforce directly taking care of the patients per bed was only about 80%. In terms of time, they also said that the nurses who directly taken care of patients only had enough time for basic tasks such as injection, giving medication, changing bandages, and record the summary of the patient's situations on the care sheet. They also claim that there were not enough fields for NP writing in the current form, which had not yet been regulated by the Ministry of Health; therefore, it might not be compulsory. On the other hand, the Chief Nurses also raised the issue that there was still a small portion of the nurses without NP writing training, showing the nonuniformity in NP writing knowledge among nurses. Besides, there was still a lack of community support for the work of nurses: "When patients come to the hospital, they usually only care about who the doctor is, but they do not know who is executing the order and caring for them." (Chief Nurses). So the Chief Nurses also frankly shared that the nurses might have thought that their responsibility was just implementing medical orders instead of dedicated to the application of Nursing Science in patient caring. The above opinions of the Chief Nurses might have negative impacts on the writing of the NP for the patient caring job.

Conclusion

The current status of the Nursing procedure writing at 8 Departments of 7A Military Hospital was described as below:

- Knowledge of NP writing: The percentage of nurses who remembered the order of the NP writing steps was relatively high, accounting for 53.4%; the percentage of those unclear was 37.8%, and completely not remember was 8.7%.
- Attitude about NP writing: Most nurses thought that it was necessary and timely to write an NP, accounting for 91.3%, and no one thought that it was unnecessary.
- The awareness of NP writing: 49.5% of respondents thought of and noted about the NP in the practice of patient caring. There were 36.6% just thought of but never had acted, and 12.9% had never thought of doing that.
- The desire to change the caring sheet: A relatively high number of nurses wanted to completely change the form (45.2%); a nearly similar number of respondents requested a writing method change while keeping the format (40.9%), and only 13.9% did not want any change.
- The need to be retrained on writing NP: The number of nurses who want to be trained again on writing NP was very high (94.6%), only 0.9% has no demand.

The impact of writing the nursing procedure at 8 departments of 7A military hospital

- The overload of nursing work.
- Unequal qualification.
- There was no specific regulation for caring forms with fields to write NP.

Suggestions

- To implement the writing of NP to the care of patients and to improve the quality of medical records, it is necessary to increase the human resources for the Departments
- Need to organize on-the-job training to unify the knowledge of NP writing for those lack of it
- The hospital needs to develop a form to write the NP in the medical record.

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