

Executive summary

Introduction:

Provision of quality health care services to patients has become indispensable for patient management in improving the concept of total quality health care delivery in Sri Lankan health system. Patients' expectations have increased exponentially as they are now well aware of medical and surgical conditions and treatment options available with rapid growth of health care delivery services. Quality of nursing care provided in Teaching Hospital Jaffna had declined in several aspects including management of urgent and critically ill patients in general surgical and medical wards and this had subsequently led to increased patient dissatisfaction.

Objective:

The objectives of this research project were to assess the existing status of quality of nursing care, to identify the gaps in the quality of nursing care and to develop, implement strategies to improve the quality of nursing care and to evaluate the effectiveness of interventions to improve the quality of nursing care in general surgical and medical wards in a tertiary care hospital setting.

Methodology:

Medical and Surgical wards of the hospital were chosen for the assessment which was carried out in three phases pre-interventional, interventional and post interventional phases. In pre-interventional phase both quantitative and qualitative techniques were used to assess gaps in the quality of nursing care.

Based on the findings of desk review, key informant interviews, focal group discussions, interview administered questionnaire, self-administered questionnaire, observation checklist and secondary data of the project, the gaps in the nursing processes and practices leading to quality of nursing care were ascertained. Thereafter, SWOT analysis was carried out to identify strengths, weaknesses, opportunities and threats and TOWS matrix was developed to formulate and prioritize the most appropriate strategies and interventions. Evidence from literature, cost, time and resource constraints and sustainability were considered in selecting the best strategies.

They were, to develop protocols and to ensure their use for admitting and discharging patients in wards, to establish a system for monitoring and supervision of quality of nursing in wards, to conduct capacity building programmes to improve, nurse's knowledge attitudes and practices, and to ensure proper maintenance procedures and recording of events to improve quality of nursing in wards.

During the interventional phase, interventions were designed and implemented. Interventions included were introduction of admission desks with dedicated nurses, implementing discharge guidelines, establishment of a quality management unit, arranging capacity building training workshops, formulation of a guidelines and Standard Operation Procedures (SOPs) and guiding tool for strengthening supervision, ensuring availability of necessary registers in wards and introduction of log books for nurses.

During the post interventional phase, same methods were applied as in the pre-interventional phase to assess the effectiveness of the interventions.

Results

In the pre-interventional phase, delays in admitting patients after coming to the wards at majority of wards, delays in discharging patients at majority of wards., absence of a proper system for monitoring and supervision of quality of nursing at wards, deficiencies in knowledge, attitudes and practices of nurses on quality assurance practices including drug management, infection control, managing aseptic conditions patient safety practices, and waste management, inadequate knowledge and skills on communication and inadequate leadership skills in administration, management and supervision in ward management and clinical governance, unavailability of Standard Operating Procedures (SOPS) to enhance the quality of the clinical service, non-availability of some important registers in many wards, lack of accountability and inadequate knowledge on equipment management and inventory management were the main gaps identified in quality of nursing care.

Strengthening the admission process at wards by introducing, of admission desks with dedicated nurses, implementing guidelines produced for discharging of patients, establishment of the quality management unit, formulation of a guidelines and SOPs and guiding tool for strengthening supervision were some of the important interventions. Other interventions were the introduction of log books for nurses, ensuring availability of necessary registers in wards and staff awareness through capacity building training workshops.

Post intervention evaluations showed a statistically significant increase in overall job satisfaction of nursing officers after the intervention (from mean value 2.63 to 3.56), at 5% significance level ($t=22.630$, $p=0.001$) and statistically significant increase in overall satisfaction of patients after intervention (from mean value 2.38 to 3.13), at 5% significance level ($t=25.924$, $p=0.001$).

The observation surveys and evaluations of the interventions in relation to process and output indicators revealed satisfactory adoption of the interventions and were consistent with above results in level of quality services delivered in medical and surgical wards. Post intervention qualitative assessments revealed stakeholder satisfaction in respect of improvements in the processes and practices of nurses in performing quality care.

Conclusion and Recommendations

Project evaluations showed that the project has been successful in improving the quality of services delivered at medical and surgical wards in Jaffna Teaching Hospital, leading to both nursing officers and patient's satisfaction.

Re-evaluation of the interventions in one year is recommended to assess the sustainability of the interventions in the long run and further development by conducting nursing officers and patient satisfaction surveys once in three years on quality of nursing care.

Key Words: Quality of nursing care, Job Satisfaction, Patients Satisfaction