



# Impact Of Awareness Programme On Knowledge Regarding Patients' Safety Among New Appointed Staff Nurses In Selected Hospital, Kolhapur

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## Abstract

The current study has been undertaken to assess knowledge score regarding Patients' safety among new appointed staff nurse by awareness programme in Selected hospital, Kolhapur. The research design used for study was pre- experimental in nature. The tool for study was self-structured knowledge questionnaire which consists of 2 parts-PART- I consisted questions related to Socio-demographic data; PART-II consisted of self -structured knowledge questionnaire to assess knowledge score regarding Patients' safety among new appointed staff nurse. The data was analyzed by using descriptive & inferential statistical methods. The most significant finding was that 20.5% of new appointed staff nurse were having average knowledge regarding Patients' safety whereas 79.5% had fair knowledge after post-test. It was suggested that nurses must educate new appointed staff nurse regarding Patients' safety.

**Keyword-** Impact, awareness programme, knowledge & Patients' safety.

## 1. INTRODUCTION

Patient safety is a major public health problem. In fact, patient safety is a global health concern that affects patients in all areas of healthcare throughout the world, whether in developed or developing countries, and it is important to have a wide range of nursing practices such as education, clinics, and management. In 2021, the World Health Organization (WHO) (World Health Organization, Citation2021) formulated 'The Global Patient Safety Action Plan 2021-2030', recognising patient safety as a top health priority. In this report, patient safety is viewed as a framework of activities that address cultures, processes, procedures, behaviours and technologies with the aim of creating an environment whereby the potential for preventable harm to occur is reduced, errors are made more unlikely, or at minimum, their impact is lessened.

## 2. NEED FOR STUDY

According to WHO 2023, Common adverse events that may result in avoidable patient harm are medication errors, unsafe surgical procedures, health care-associated infections, diagnostic errors, patient falls, pressure ulcers, patient misidentification, unsafe blood transfusion and venous thromboembolism.

Patient harm potentially reduces global economic growth by 0.7% a year. On a global scale, the indirect cost of harm amounts to trillions of US dollars each year.

Investment in reducing patient harm can lead to significant financial savings, and more importantly better patient outcomes. An example of a good return on investment is patient engagement, which, if done well, can reduce the burden of harm by up to 15%.

### 3.OBJECTIVE OF THE STUDY

1. To assess the pre-test & post-test Knowledge score regarding Patients' safety among new appointed staff nurse.
2. To assess impact of awareness programme on knowledge regarding Patients' safety among new appointed staff nurse.
3. To find out association between pre-test knowledge score regarding Patients' safety among new appointed staff nurse with their selected demographic variables.

### 4. HYPOTHESES:

**RH<sub>0</sub>:** There will be no significant difference between pretest & post-test knowledge score on Patients' safety among new appointed staff nurse.

**RH<sub>1</sub>:** There will be significant difference between pretest & post-test knowledge score on Patients' safety among new appointed staff nurse.

**RH<sub>2</sub>:** There will be significant association between pre-test score on Patients' safety among new appointed staff nurse with their selected demographic variables.

### 5. ASSUMPTION

1. New appointed staff nurse may have deficit knowledge regarding Patients' safety.
2. Awareness programme will enhance knowledge of new appointed staff nurse regarding Patients' safety.

### 6. METHODOLOGY:

An evaluative approach was used and research design pre-experimental one group pre-test post-test research design was used for the study. The samples consisted of 44 new appointed staff nurses selected by Non probability convenient sampling technique. The setting for the study was Selected hospital, Kolhapur. Data was gathered with help of demographic variables & administering a self-structured knowledge questionnaire by analyst prior & after awareness programme. Post-test was done after seven days of pre-test. Data were analysis using descriptive & inferential statistics.

### 7.ANALYSIS AND INTERPRETATION

**SECTION-I Table -1 Frequency & percentage distribution of samples according to their demographic variables.**

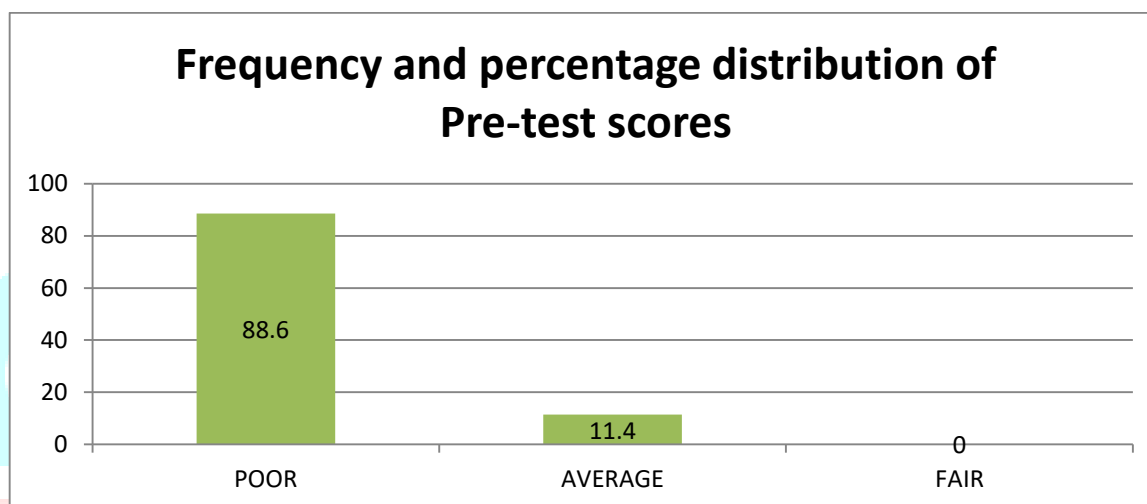
n = 44

S. No	Demographic Variables	Frequency	Percentage
<b>1</b>	<b>Age in Years</b>		
a.	21-22	6	13.6
b.	23-24	23	52.3
c.	≥25	15	34.1
<b>2</b>	<b>Professional Qualification</b>		
a.	GNM	19	43.2
b.	Post B.Sc. Nursing	24	54.5
c.	B.Sc. Nursing	1	2.3
<b>3</b>	<b>Gender</b>		
a.	Male	25	56.81
b.	Female	19	43.18
<b>4</b>	<b>Attended any conference and workshop</b>	5	11.4
a.	Yes	39	88.6
b.	No		

**SECTION-II- Table- 2.1.1- Frequency and percentage distribution of Pre-test scores of studied subjects:**

Category and test Score	Frequency (N=44)	Frequency Percentage (%)
POOR (1-10)	39	88.6
AVERAGE (11-20)	5	11.4
GOOD (21-30)	0	0.0
TOTAL	44	100.0

The present table 2.1.1 concerned with the existing knowledge regarding Patients' safety among new appointed staff nurse were shown by pre-test score and it is observed that most of the new appointed staff nurse 39 (88.6%) were poor (01-10) knowledge & some new appointed staff nurse have 5 (11.4%) were from average category.



**FIG.-2.1.1- Frequency and percentage distribution of Pre-test scores of studied subjects**

**Table-2.1.2. - Mean ( $\bar{X}$ ) and standard Deviation (s) of knowledge scores:**

Knowledge Pre-test	Mean ( $\bar{X}$ )	Std Dev (S)
Pre-test score	1.11	0.32

The information regarding mean, percentage of mean and standard deviation of test scores in shown in table 2.1.2 knowledge in mean pre-test score was  $1.11 \pm 0.32$  while in knowledge regarding Patients' safety among new appointed staff nurse in Selected hospital, Kolhapur.

Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill first objective of the present study.

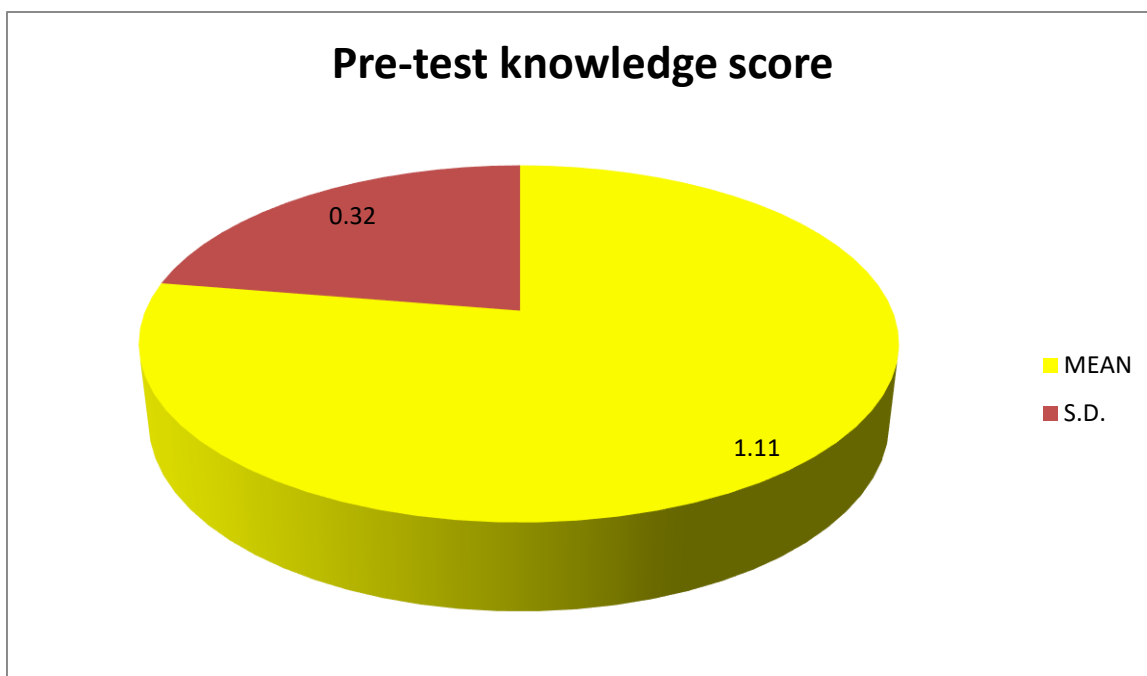


FIG.-2.1.1. - Mean ( $\bar{X}$ ) and standard Deviation (s) of knowledge scores

Table-2.2.1- Frequency and percentage distribution of Post test scores of studied subjects:

Category and post-test Score	Frequency (N=44)	Frequency Percentage (%)
POOR (01-10)	0	0.0
AVERAGE (11-20)	9	20.5
GOOD (21-30)	35	79.5
TOTAL	44	100%

The present table 2.2.1 concerned with the existing knowledge regarding Patients’ safety among new appointed staff nurse was shown by post test score and it is observed that most of the new appointed staff nurse 35 (79.5%) were **FAIR** (21-30) knowledge & other new appointed staff nurse have 9 (20.5%) category which are **AVERAGE** (11-20) posttest knowledge score in present study.

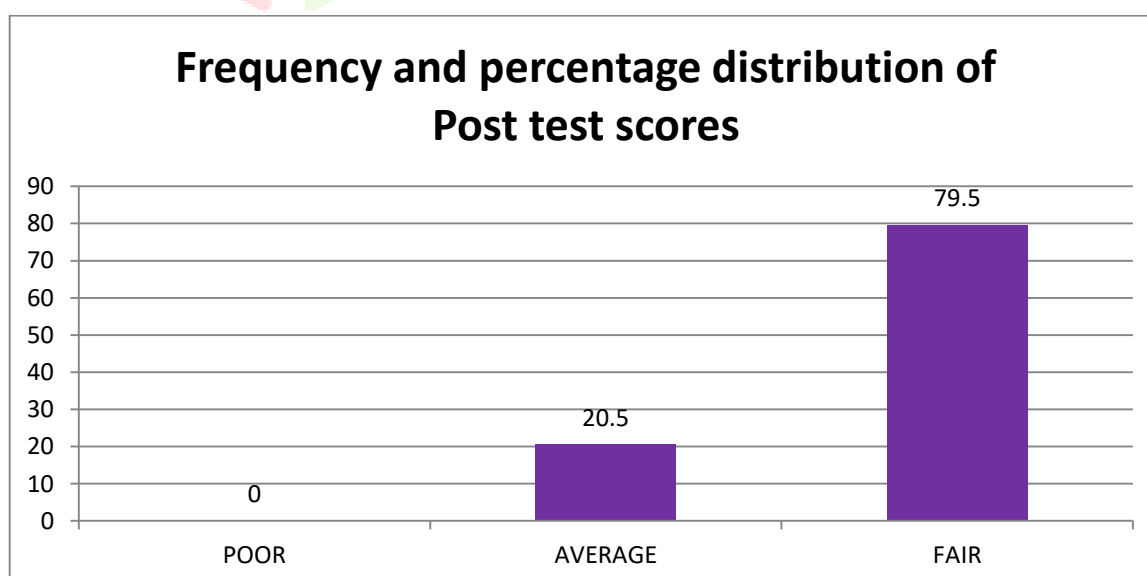


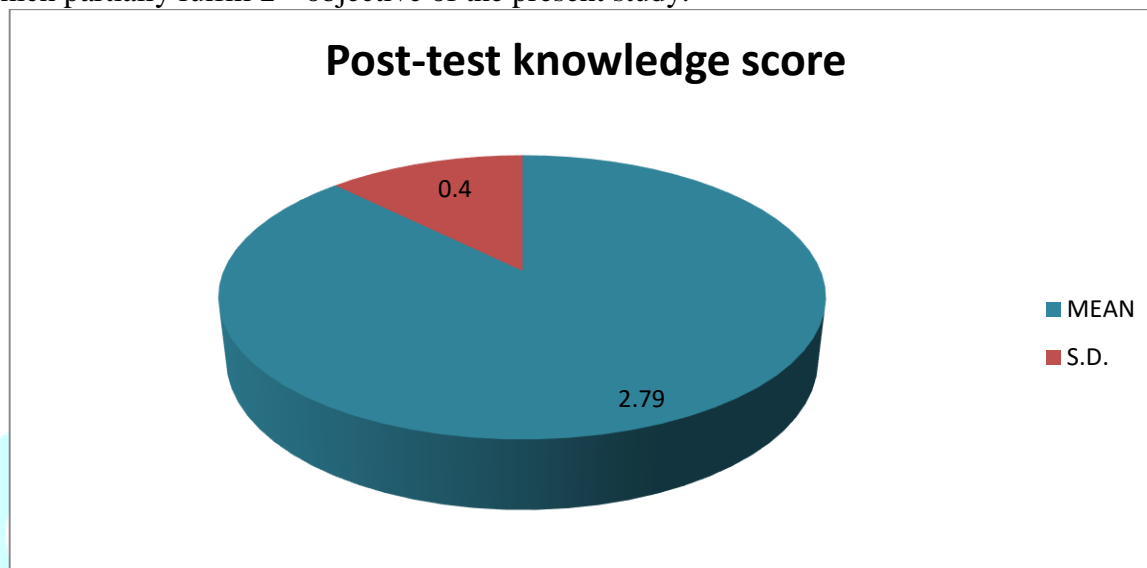
FIG.-2.2.1- Frequency and percentage distribution of Post test scores of studied subjects

**Table-2.2.2. - Mean ( $\bar{X}$ ) and standard Deviation (s) of knowledge scores:**

Knowledge Test	Mean ( $\bar{X}$ )	Std Dev (S)
Post-test score	2.79	0.40

The information regarding mean, percentage of mean and SD of post test scores in shown in table 2.2.2 knowledge in mean post test score was  $2.79 \pm 0.40$  while in knowledge regarding Patients' safety among new appointed staff nurse in Selected hospital, Kolhapur.

Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill 2<sup>nd</sup> objective of the present study.

**FIG.-2.2.2. - Mean ( $\bar{X}$ ) and standard Deviation (s) of knowledge scores:****TABLE 2.2.3: Impact of awareness programme by calculating Mean, SD, Mean Difference and 't' Value of Pre-test and Post-test knowledge.**

Knowledge Score of New appointed staff nurse	Mean ( $\bar{X}$ )	S. D. (s)	Std. Error of Mean	D. F.	t-value	Significance
Pre-test	1.11	0.32	0.07812	43	-21.53	P<0.0001*
Post-test	2.79	0.40				

When the mean and SD of pre-test & post-test were compared & 't' test was applied. It can be clearly seen that the 't' value was -21.53 and p value was 0.0001 which clearly show that awareness programme was very effective in enhancing the knowledge of new appointed staff nurse.

**SECTION-III Association of knowledge scores between test and selected demographic variables:****Table- 3.1 Association of age of new appointed staff nurse with pre-test scores:**

Age (in years)	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	FAIR (21-30)	
21-22	4	2	0	6
23-24	20	3	0	23
≥25	15	0	0	15
<b>Total</b>	<b>39</b>	<b>5</b>	<b>0</b>	<b>44</b>
$X^2=4.86$ $p>0.05$ (Insignificant)				

The association of age test scores is shown in present table 3.1. The probability value for Chi-Square test is 4.86 for 2 DF which indicated insignificant value ( $p>0.05$ ). Hence, it is identified that there is a insignificant association between age & test scores. Moreover, it is reflected that age isn't influenced with current problem.

**Table- 3.2 Association of professional qualification with pre-test scores:**

Professional qualification	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	FAIR (21-30)	
GNM	15	4	0	1
Post B.Sc.	23	1	0	19
B.Sc.	1	0	0	24
<b>Total</b>	<b>39</b>	<b>5</b>	<b>0</b>	<b>44</b>
$X^2=3.13$ $p>0.05$ (Insignificant)				

The association of professional qualification & test scores is shown in present table 3.2. The probability value for Chi-Square test is 3.13 for 2 degrees of freedom which indicated a insignificant value ( $p>0.05$ ). Hence, it is identified that there is a insignificant association between professional qualification & test scores.

**Table-3.3. Association of gender with pre-test scores:**

Gender	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	FAIR (21-30)	
Male	21	4	0	25
Female	18	1	0	19
<b>Total</b>	<b>39</b>	<b>5</b>	<b>0</b>	<b>44</b>
$X^2= 13.37$ $p>0.05$ (Insignificant)				

The association of gender & test scores is shown in present table 3.3. The probability value for Chi-Square test is 13.37 for 2 degrees of freedom which indicated insignificant value ( $p>0.05$ ). Hence, it is identified that there is a insignificant association between gender & test scores. Moreover, it is reflected that gender isn't influenced with present problem.

**Table- 3.4 Association of attended any conference with pre-test scores:**

Attended any conference	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	FAIR (21-30)	
Yes	4	1	0	5
No	35	4	0	39
<b>Total</b>	<b>39</b>	<b>5</b>	<b>0</b>	<b>44</b>
$X^2=0.41$ $p>0.05$ (Insignificant)				

The association of attended any conference on patient's safety and test scores is shown in present table 3.4. The probability value for Chi-Square test is 0.41 for 1 degrees of freedom which indicated attended any conference on patient's safety & test scores. Moreover, it is reflected that attended any conference on patient's safety isn't influenced with current problem.

## 8.RESULTS

The result of this study indicates that there was a significant increase in post-test knowledge scores compared to pre-test scores of Patients' safety. The mean percentage knowledge score was observed  $1.11\pm 0.32$  in pre-test & after implementation of awareness programme post-test mean percentage was observed with  $2.79\pm 0.40$ .

## 9.CONCLUSION

Thus, after the analysis and interpretation of data we can conclude that the hypothesis RH1 that, there will be significance difference between pre-test knowledge score with post-test knowledge score at ( $P<0.001$ ) is being accepted.

Furthermore, awareness programme related to Patients' safety among new appointed staff nurse may consider as an effective tool when there is a need in bridging & modifying knowledge.

## 10.LIMITATIONS-

- This was limited to Selected hospital, Kolhapur.
- This was limited to 44 new appointed staff nurses.

## 11.REFERENCE-

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