

Exploration and Analysis of the Application of Nursing Risks Management in the Nursing Management of Department of Respiration

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ABSTRACT Objective: To analyze the application of nursing risk management in nursing management in Department of Respiration. **Method:** Select the medical records of 64 cases of hospitalized patients as the research object, then randomly divide them into observation group and control group with 32 cases in each. The observation group is given nursing risk management, and the control group is given basic nursing management. Two groups are compared quality of life and care satisfaction. **Results:** The environmental indicators, physiological indices and psychological indices, emotional state, degree of independence and social function sub-index score of the patients in the observation group are significantly higher than that of patients in the control group, and the difference is statistically significant ($p < 0.05$). Patient care satisfaction rate and medical staff satisfaction of the patients in the observation group are significantly better than that of control group, and the difference is significant ($p < 0.05$). In addition, nursing safety accident rate in the observation group is significantly lower than that of control group, and the difference is significant ($p < 0.05$). **Conclusion:** Application of nursing risk management has a high value in nursing management in Department of Respiration, and is worthy of promotion in clinical.

KEYWORDS

Respiratory medicine
Nursing management
Nursing risk

1. Introduction

Nursing risk refers to the possibility of death, wound or disability caused directly or indirectly by unsafe factors. It has the features of high risk level, uncertainty and complexity besides the features of general risks. Nursing risks exist in all links of nursing work. Nursing risks management means hospitals eliminate or reduce the harms and economic losses caused by nursing risks in an organized and systematic way, and seek the prevention measures of nursing risks through the analysis of nursing risks to reduce nursing risks furthest [1]. Department of Respiration has many patients, mostly including senior people,

who have severe and quickly varying conditions. The function decline of heart, cerebral vessels and other main visceral organs, hypimmunity, multiple complex diseases, hidden onset of diseases, the suddenness of onset, high sudden death rate as well as other features make senior people become the high-risk group of risks management in hospitals and make the wards in Department of Respiration become one of the key departments of risks management in hospitals [2]. With the worsening environment pollution, increase of smoking rate and constant increase of senior people, the occurrence of respiratory diseases constantly increases. The patients in Department of Respiratory are mostly chronic disease patients, who have the features of oldness, long length of stay and varying quickly conditions. It mainly includes respiratory tract infection, bronchial asthma and chronic obstructive pulmonary disease which seriously influences their life quality and threatens their life [3]. Risks management is a kind of management procedure mainly used to assess and handle the existing or potential medical risk events. In order to study the application values of nursing risks management, our hospital selects 64 patients in Depart-

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ment of Respiration as research objects with relevant reports as follows:

2. Data and Methods

2.1. Clinical data

The papers selects 64 patients hospitalized in our hospital as research objects and divide them into observation group and control group with each containing 32 cases. Observation group contains 20 males and 12 females with average age of (61.5 ± 6.7) , including 11 bronchial asthma patients, 8 acute and chronic bronchitis patients and 13 other diseases patients. Control group contains 22 males and 10 females with average age of (63.7 ± 5.9) , including 11 bronchial asthma patients, 8 acute and chronic bronchitis patients and 13 other diseases patients. The two groups do not have significantly statistical differences ($p > 0.05$) in gender, age, disease type and other aspects and have comparability.

2.2. Method

Control group is offered conventional nursing interventions including basic nursing intervention, nursing intervention with treatment nature and relevant the propaganda and education of healthy knowledge; nursing risks management is conducted to observation group based on control group with the specific procedures of nursing risks management as follows:

(1) Nursing risks identification: summarizing the causes of nursing accidents and the events with potential nursing risks in Department of Respiration by checking literature, the discussion of all nurses, the analysis of previous cases and other forms which include the following aspects: (i) Emergence treatment: lacking emergency capacity, skillful operation of first-aid equipment and the knowledge of rescue drugs; (ii) Operation skills: nonstandard operation and lacking professional operation skills; (iii) Hospital infection: Department of Respiration is the frequently-occurring department of hospital infection. Hospital infection is related to cross infection caused by the occupational exposure and nonstandard operation of nursing personnel; (iv) Nursing accidents: falling down from bed, tumbling, burning, pressure sores, etc. [4]; (v) Others: wrong drugs, wrong adjustment of oxygen flow rate, wrong samples collection, etc.

(2) Risks analysis: the causes of nursing risks are analyzed targeted after identifying the nursing risks of our department with main causes as follows: (i) Nursing management factor: department does not have enough personnel and head nurse and the nurses with high qualification are busy with routine businesses which leads to unqualified training. And unqualified assessment leads to nursing risks; (ii) Nursing personnel factor: the nurses with low qualification account for 2/3 of all nurses in the department who have weak consciousness of service, safety and responsibility, are not good at businesses because of lack-

ing professional knowledge and cannot mastered new technologies; (iii) Ward equipment and environment factors: the medical equipment in wards are not enough and the unreasonable design of beds cause accidents; (iv) Society factors: the mood of patients and patients' family members and their economic state all can influence the recovery of patients.

(3) The implementation of risks management: the risks prevention strategies summarized and formed by checking literature, learning others' experience and lessons, the communication among nursing personnel and other ways aiming at the possible nursing risks in Department of Respiration are as follows: (i) hospitals should form risks management group and build nursing risks system and three-grade quality control system. Quality personnel should take advantage of half an hour to analyze the nursing risks in the week and propose corresponding solutions [5] after handing over to the next shift; (ii) Hospitals should strengthen business training for the nurses with low qualification including different emergency measures, the operation of equipment in department, professional theoretical knowledge and the procedures and routines of nursing. And nursing personnel should learn for ten minutes through QQ group in department every night and review the knowledge and are questioned next morning. And hospitals should also invite relevant experts to improve the risk consciousness and nursing level of nursing personnel by class and other forms; (iii) Hospitals should adopt positive measures to eliminate danger factors, designate nurses to ward around regularly, dynamically learn about the conditions change of patients and report them to doctor timely so that patients can get fast and effective treatment and nursing accidents caused by the bad habits of nursing personnel in communication, operation, information and demonstration can be reduced; (iv) Hospitals should improve the consciousness of risks prevention of nursing personnel, analyze typical cases in class to warn nursing personnel and organize nursing personnel to regularly study the laws and regulations relating to medical disputes; (v) Normalized medication management: nursing personnel should check the metering and expiry date of medicine bottle and put drugs in a designated place every day. And nursing personnel hand over to the next shift every day to meet the requirements of emergency treatment. When rescuing patients, nursing personnel should strictly implement doctor's advice and closely observe the reaction and effects after medication [6].

2.3. Curative effects judgment

The life quality survey sheet of WHO is adopted to assess the research with indicators including environment indicator, physiological indicator, mental indicator, emotional state, degree of independence and social functions. The full mark is 100 points. The higher the grades are, the higher the life quality [7].

2.4. Statistical handling

Observation data is processed with SPSS 16.0 statistical software, measurement materials is represented by $(\bar{x} \pm s)$ and tested by t and counting materials are tested by χ^2 . $p < 0.05$ means the statistically significant difference.

3. Results

3.1. The comparison of different indicators of two groups

After nursing intervention, the grades of observation group in environment indicator, physiological indicator, mental indicator, emotional state, degree of independence and social functions are respectively (67.9 ± 7.1) points, (62.3 ± 6.1) points, (60.9 ± 7.2) points, (66.8 ± 6.9) points, (65.6 ± 7.3) and (72.3 ± 6.7) . And those of control group are respectively (51.8 ± 5.7) points, (49.7 ± 5.3) points, (48.8 ± 5.7) points, (52.0 ± 4.5) points, (49.6 ± 5.7) points and (60.8 ± 4.4) . And the life quality of observation group is obviously higher than that of control group ($p < 0.05$) with statistical significance.

3.2. The comparison of degree of satisfaction and occurrence of accidents of two groups

In observation group, the satisfaction rate of patients is 96.88% (31/32), the satisfaction degree of medical personnel is 100%, and the occurrence of nursing accidents is 3.125% (1/32); in control group, the satisfaction rate of patients with nursing is 87.5% (28/32), the satisfaction degree of medical personnel is 93.75% (30/32), and the occurrence of nursing accidents is 18.75% (6/32). Observation group has higher satisfaction rate of patients with nursing and satisfaction degree of medical personnel with nursing than control group with significant difference ($p < 0.05$). Besides, the occurrence of nursing accidents of observation group is significantly lower than control group with significant difference ($p < 0.05$).

4. Discussion

Risks management, as a kind of management procedure, intervenes effectively potential risks and avoids risks preponsely. Nursing risks management is conducted in nursing process by applying the concept. First, we identify the different potential risks of patients hospitalized in Department of Respiration through different forms and analyze the causes of risks. We find there are many causes of nursing risks which are not only related to nursing personnel but also to patients and their family members. Aiming at the causes of risks we analyze, we propose risks management strategies, form nursing risks management group, check the potential risks in wards at any time, and strengthen the businesses studying and the sense of responsibility [7] of nursing personnel through quality control circle and other methods.

The patients in Department of Respiration are mostly senior and mostly have chronic diseases, long hospitaliza-

tion time and weak self-care ability, so the requirements for the nursing in Department of Respiration are high and the nursing risks in Department of Respiration are higher. Therefore, hospital should not only improve the nursing with treatment nature and basic life nursing of diseases, but also strengthen the intervention and prevention of danger factors, reduce the occurrence of adverse events, improve the hospitalization quality of patients, enhance the recovery of patients and improve the life quality of patients. Nursing management mode aims to manage the possible risk factors of nursing, prevent the occurrence of potential nursing risks and provide effective and safe risks nursing intervention for patients [8]. The materials show that the grades of observation group in environment, psychological, and mental indicator. Emotional state, degree of independence and social functions are higher than control group with statistically significant differences. The satisfaction rate of patients with nursing and the degree of satisfaction of medical personnel with nursing in observation group are significantly higher than those in control group with significant difference ($p < 0.05$). Besides, the occurrence of nursing accidents in observation group is significantly lower than that in observation group with significant difference ($p < 0.05$). We can see that nursing risks management, which has improved life quality of patients, improved the degree satisfaction with nursing service and reduced the occurrence of accidents and nursing disputes, has relatively higher application value in the nursing management in Department of Nursing, so it is worth promoting.

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