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# Documentation of implemented of nursing process in Jugal Hospital Harar Ethiopia

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## **ABSTRACT**

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#### Keywords

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Nursing care documentation has been defined as the record of nursing care that is planned and performed to specific patients and by nurses since the early days of Nightingale. To assess Documentation of Implemented nursing process in Jugal Hospital, Harar, Ethiopia. At Jugal hospital in Harar town, 525 kilometers east of Addis Ababa, hospital-based retrospective study design was used and the research took place from January 1st to 27th,2022. The sample size was derived using the single population proportion calculation, the total sample size was 289. IBM SPSS software package version 20.0 (Armonk, NY: IBM Corp) was used to enter, clean, and analyze data. The overall the implementation of the nursing process in this study is 62.97 %, With regards to the specific components implemented the result shows that 35.99% charts were recorded with assessment and diagnosis part of the nursing process followed by planning 29.07 % whereas implementation and evaluation parts were the least documented in the hospital. In nursing practice, documentation is important; hence it is believed that what is not recorded has not been done and lack of documentation may make it suspicious that they did not do their duty. So the nursing process committees or the hospital matron and the nurse managers at the hospital should conduct routine supportive supervision on NP.

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## 1. Introduction

Nursing process is one of the areas where professional nurses are accountable and responsible. Nursing quality will improve if it is carried out in a methodical manner (LaBronte et al., 2019). It's a method of detecting, preventing, and curing existing or prospective health problems using a methodical problem-solving approach (Santy-Tomlinson et al., 2021). Assessment, diagnosis, planning, execution, and evaluation are the five interrelated phases. It might be used to direct nursing care, allowing nurses to make autonomous, evidence-based decisions that help patients recover (Kennedy & Hussey, 2015).

Since the early days of Nightingale, nursing care documentation has been described as a record of nursing care that is planned and performed to individual patients and by nurses (Deliktas et al., 2019). Early recognition of deteriorating patients' states, as well as good communication and response by members of the multidisciplinary care team, are required for reduced hospital mortality. Nurses should keep records of their observations rather than their opinions (Al-Jubouri et al., 2021).

Nursing documentation can be aided by narrative charting, problem-oriented techniques, clinical pathways, and focus notes, to name a few (Hussey, 2021). When it comes to keeping accurate and legally sound documentation, many nurses confront challenges such as negative attitudes, a lack of

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awareness about nursing documentation, a lack of time, and a tremendous workload. This results in inadequate nursing care documentation due to a lack of collaboration among healthcare team members and providers (Kennedy & Hussey, 2015).

African nurses see it as a key practice in patient African nurses see it as a key practice in patient ,despite the fact that documentation is still challenging owing to a lack of pre- and post-service training (Entman, 2020), resources and supplies, comprehensive nursing education (CNE), time limits, and congestion, For the past five years, Ethiopia's Federal Ministry of Health has been working to improve the country's nursing care quality (Osman et al., 2021). A national nursing process guideline, national nurse mobilization activities, a national dress code guideline, and national nursing service quality improvement audit instruments were among those developed (Hammerschmidt & Manser, 2019). Despite the fact that Ethiopia addresses nursing care outlines, as well as assessment, planning, and evaluation of care, nurses' comprehension, attitude, and practice of nursing care documentation remain in question (Lee et al., 2018).

Many studies on the use of the Nursing Process and related factors among nurses have been undertaken in Ethiopia and internationally (Whittemore & Knafl, 2005). However, almost all of the research participants were nurses, which, as we all know, can contribute to a social expectation bias that inflates the results. The current study, however, may be able to overcome this limitation because we are collecting data after evaluating patient documentation (document review). So the aim of this study is to assess Documentation of Implemented nursing process in Jugal Hospital, Harar, Ethiopia.

# 2. Theoretical Framework

A total of 289 documents reviewed, all patients chart (100%) had attached format of nursing process in it, because in Jugal hospital all admission charts will pass under liaison office and this office is responsible to attach all necessary formats including nursing process format due to this all charts had it (Pesut et al., 2020). Nevertheless only around two third 182 (62.98%) charts had something written on nursing process format, whereas the rest do not had anything written on it (Tsimane & Downing, 2020). According to Molla (2014) Assessment and Diagnosis, Among 182 charts which have nursing process written, more than half104 (57.14%) of charts have nursing assessment and diagnosis, this is because when a new patient admitted to the ward, an initial patient assessment was carried out within the first 24 hours of patient admission for some of the patients (Chiffi, 2021).

According to Michel (2021) Nursing Plan, Among 182 charts which have nursing process written, 84 (46.15%) of charts have nursing Plan even though there was written plan some of them were not with enough detail. Implementation, Among 182 charts which have nursing process written, 44 (24.18%) of charts have nursing Implementation. Evaluation, Among 182 charts which have nursing process written, 22 (12.09%) of charts have nursing Implementation (Wang et al., 2011). Summary of Nursing Process Implementation, The overall the implementation of the nursing process in this study is 62.97%, With regards to the specific components implemented the result shows that 35.99% charts were recorded with assessment and diagnosis part of the nursing process followed by planning 29.07% whereas implementation and evaluation parts were the least documented in the hospital (N. & A., 2018).

Nursing process implementation variables	Yes	No
Is there nursing process attached with the patients' file?	289(100%)	0(0%)
Does a charts had something written on nursing process format/	182 (35.98%)	107(37.02%)
Is nursing assessment & diagnosis stated?	104(35.99%)	185(64.01%)
Does the plan of care stated base on priority?	84(29.07%)	205(70.93%)
Does the nursing intervention documented based on the plan?	44(15.22%)	245(84.78%)
Does evaluation took place based on the intervention?	22(7.61%)	267(92.39%)

**Table 1.** Implementation of nursing processing in Jugal hospitals, Harar, Ethiopia, 2022

The current study is a survey of secondary data from a chart for recorded implemented nursing process and this method does not provide the cause effect relationship.

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### 3. Method

This Design, Area, and Timeframe of the Research: At Jugal hospital in Harar town, 525 kilometers east of Addis Ababa, hospital-based retrospective study design was used and the research took place from January 1st to 27th, 2022. Population and Sampling technique: As a sample frame the previous year, all patient records in the hospital's record unit and the nursing station room were used. The sample size was calculated using the single population proportion method, with a P value of 78.1 percent reported in a similar research done in Ethiopia and a 10% non- respondent rate added, yielding a sample size of 289. Random sampling was done in a systematic manner (Iheduru-Anderson & Wahi, 2021). Data collection, An English-Checklist was used to collect the data. Pretesting was done on 5% of the sample population before to the main trial at the Hiwot-fana specialized hospital, which was not part of the study (Hammerschmidt & Manser, 2019). The data collection technique was carried out by four BSc nurses, with one Health officer in charge of the entire process. All data collectors were taught on the equipment and data collection procedure for a half day.

Data processing and analysis: To enter, clean, and analyze data, IBM SPSS software package version 20.0 (Armonk, NY: IBM Corp) was utilized. The findings of the data analysis were presented as descriptive statistics including mean, standard deviation, and percentages, charts and graphs (Al-Jubouri et al., 2021). Ethical considerations, This research received ethical approval from the Harar Health Science College Ethics and research committee (ref. number HHSC116/2022). The study was conducted with permission from authorized authority of the hospital.

## 4. Results and Discussion

In nursing practice, documentation is important; hence it is believed that what is not recorded has not been done (Baker et al., 2021). Study conducted in Uganda reveal that as such lack of documentation may make it suspicious that they did not do their duty. In this study the nursing process format was attached to all (100%) chart reviewed whereas study done in in Harari Regional State and Dire Dawa Administration Governmental Hospitals, Ethiopia showed only 21.1% of the charts reviewed, other study done in Ethiopia showed 78.1%. The difference might be due to study population in this study only one hospital in harari region is included and the hospital has a rule of all admission charts must pass under liaison office and this office is responsible to attach all necessary formats due to this all charts had an attached format. This study shows the overall the implementation of the nursing process is 62.97 %, the result is higher than studies done in Kenya, 33.1%, Nigeria,57.1%, whereas it is lower than study done and Brazil, 81.77%. The discrepancy could be justified by difference in awareness, knowledge, educational background among nurses, policy, and health system strategies (Honkavuo, 2021).

In this study the documented specific components of nursing process implemented result shows that assessment and diagnosis 35.99%, planning 29.07 %, implementation and evaluation15.22% &7.61% respectively. It is lower than studies done in Southwest Ethiopia, the result showed; nursing diagnosis, 71.7% plan, 71%, implementation ,67.4% and evaluation 64.5% Afar region, Assessment and diagnosis, 56.9%, planning, 46%, implementation 38% and evaluation 36%. The difference might be due to difference in sample size and related to the disparity in the overall implementation between the two studies.

# 5. Conclusion

In Proper implementation of the Nursing Process will ensure that the patient needs are all catered for with a good patient outcome. Whereas In nursing practice, documentation is important; hence it is believed that what is not recorded has not been done and lack of documentation may make it suspicious that they did not do their duty, The Ministry of Health should already strengthen national policy frameworks aimed at improving nursing process training and implementation at clinical setting in Ethiopia. So the nursing process committees or the hospital matron and the nurse managers at the hospital should conduct routine supportive supervision on NP.

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