Prevalence and Factors Associated with Compassion Fatigue Among Nurses in the Philippine Heart Center (2015)

Division of Pediatric Care

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ABSTRACT

Background

One of the core values of Philippine Heart Center is compassion. It entails healing and nurturing response to the suffering of others. More often than not, nurses are not aware of the consequence of negative things they absorb when interacting with patients and their family that eventually leads to compassion fatigue. Extreme stressors include burnout and secondary traumatic stress that affect efficient patient care.

Objective

To determine the level and factors associated with compassion fatigue such as burnout and secondary stress among nurses at the Philippine Heart Center.

Methods

The study utilized a cross-sectional analytic design. Level of compassion was correlated with the nurses' age, gender, length of direct patient care, unit assignment, stress level, job fulfillment and compassion satisfaction. Survey was conducted in all nursing units of the Philippine Heart Center. Sample population (*n=262*) was determined through total enumeration. Workplace stress level of staffs was measured through self-administered tool with 10-item questionnaire that was pretested with a Cronbach's alpha result of 0.97. Professional Quality of Life Scale Version 5 (PROQOL5) was utilized to determine the levels of compassion fatigue, compassion satisfaction, burnout and secondary traumatic stress.

Results

Findings revealed that higher level of work stress results to higher chance of secondary traumatic stress among nurses at the Philippine Heart Center. While male nurses appeared more vulnerable than female nurses, higher autonomy, professional development, empowerment, work environment and fundamentals of quality nursing care all relate to burnout.

Relationship Between Certification Status of Nurses and Patient Outcomes in the Intensive Care Unit (2015)

Division of Critical Care

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Background of the Study: Certification and competence of nurses are related to quality patient outcomes and satisfaction. Intensive Care Unit (ICU) certification has perceived intrinsic value, empowerment and heightened collaboration with the healthcare team when dealing with patients' safety. The level of knowledge and judgment appear to play a crucial role in the prevention, mitigation, and creation of adverse advents in the clinical setting.

Objective: To explore the link between nurses' competence in the Intensive Care Unit, as measured by certification status, and patients' outcomes.

Methods: A cross-sectional, analytic study design was used to determine the association of nurse certification status to patient outcomes. Data on the prevalence of adverse events were documented in all ICUs of the Philippine Heart Center and were analyzed and correlated with data on Department of Health (DOH)-certified ICU nurses. Homogeneity of ICUs was subjected to ANOVA while correlation between percentage of certified nurses and patient outcomes for each unit was determined through Pearson's product-moment correlation.

Results: Findings of this study provided an understanding of the relationships between competence and certification of ICU nurses ($n=157$) and safety of patients. Total adverse events (Pearson's $r=-0.01$) include pressure ulcer, medication error, fall, unplanned extubation, and Catheter Associated Urinary Tract Infection (CAUTI) which revealed no significant correlation ($p\text{-}value\ 0.99$) with total DOH certified nurses (67%). Certification of registered nurses is associated with expertise in a specialized area of practice. Whether or not the percentage of registered nurses provides an additive effect in combination with nurse staffing, nurse education, and healthy work environments, delivering safe and high-quality care depends heavily on investment in nursing certification and alignment of the nursing certification process.

The Effectiveness of Discharge Instructions Towards Medication Compliance Among Adult Service Cardiac Patients of the Philippine Heart Center (2016)

Division of ER/OPD/ASW/Diagnostic Care
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Background of the Study: Effective discharge planning is very crucial to care continuity. Compliance with medical recommendation is a complex challenge for every discharged patient as far as patient safety is concerned. Failure to conform with instruction can lead to worse medical repercussions, hence, excellent planning and good follow-up can improve patient's health, reduce readmissions and decrease healthcare costs.

Objective: To determine the effectiveness of medication discharge instructions among adult cardiac service patients.

Methods: Descriptive research design was used to evaluate significant difference in comprehension and compliance on discharge instructions among cardiac patients. The study considered total enumeration of adult social service patients diagnosed with cardiac disease. Survey adapted Test for Knowledge Questionnaire used by Clarke including Discharge Instruction Evaluation; Test for Medication Compliance; and Guideline to Measure the Knowledge of Patients to Medications. Comparison of pretest and post-test knowledge scores were compared using dependent t-test. Factors associated with compliance were analyzed using logistic regression analysis.

Results: Findings of this study showed a remarkable increase in knowledge and compliance with discharge instruction on medications ($p\text{-}value$=0.001). Home medication regimen among the respondents (n=24) exhibited more comprehensive understanding with anti-hypertension, anti-coagulants, cardiac glycosides, diuretics, and cholesterol lowering medications.

Prevalence and Associated Factors of Ergonomics-Related Injuries Among Nurses of Philippine Heart Center (2016)

Division of Pediatric Care

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Background of the Study: Workplace-related injury can be equated to poor ergonomics which is common and yet often neglected hazard in the health care industry. Nurses, among other medical practitioners, experience the highest rates of ergonomics-related injuries. In the Philippine Heart Center alone, musculoskeletal and low back pain were consistently included among the top ten medical complaints of employees.

Objective: To determine the prevalence and contributing factors to ergonomics-related injuries among nurses of Philippine Heart Center.

Methods: A cross-sectional analytic design was used to determine the prevalence of ergonomics-related injuries and other associated factors among nurses of Philippine Heart Center. Nurse participants (n=582) were given self-administered questionnaire adapted from Kourinka Standardized Nordic Questionnaire, a tool used for analysis of musculoskeletal symptoms in an ergonomic and occupational health. Factors associated with ergonomics-related injuries were determined using logistic regressive analysis. The level of significance was set at 5%.

Results: Findings of this study showed that majority of staff nurses (*n=524*), mostly female, reported ergonomics-related injuries in which the upper and lower back are the most vulnerable body part. There was a statistically-significant association between gender, awkward posture, and staffing (nurse-to-patient ratio) in acquiring ergonomics-related injuries.

Compliance on Reporting Patient Safety-Related Errors Among Staff Nurses of the Philippine Heart Center: An Evaluation (2016)

Division of Medical-Surgical Care I

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Background of the Study: Human errors are one of the serious problems in Nursing Service that potentially threaten public safety. While there are institutional policies that require incident reporting, compliance on reporting committed error is particularly important in the clinical setting to improve safety practices. Transparency and effective communication are continual challenge among hospital administrators in promoting more efficient documentation of patient safety-related errors.

Objective: To evaluate the compliance on reporting patient safety-related errors among staff nurses of the Philippine Heart Center .

Methods: The study utilized cross-sectional analytic design from a specific population within a specific time frame. Convenience sampling was employed in data gathering. The study adapted Lauris Kaldjian's and Galicinao's research tool to determine compliance on reporting medication errors, fall incidents, and needle stick injuries among staff nurses ($n=402$). Factors associated with non-reporting were determined using Fisher's exact test and the level of significance was set at 5%.

Results: Novice nurses with 0-12 months work experience from the non-critical department were found to be less compliant in reporting medication errors because of fear of disciplinary action. Adverse consequence of reporting is believed to be the prime barrier to error reporting.