

## Research sharing: In-patients' perception of nursing caring survey

住院病人感知護理關懷之現況調查

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## Background

- Jean Watson's Theory of Caring  
"The process of human care for individuals, families, and groups is a major focus for nursing not only because of the dynamic human-to-human transactions, but because of the requirements of knowledge, commitment, and human values, and because of the personal, social, and moral engagement of the nurse in time and space" (Watson, 1988)



## Phenomenon of Concern

- Watson's Theory attempts to:
  - Define nursing as a distinct health profession
  - Make explicit nursing values, knowledge & practices
    - Inner healing process
    - Experiencing the person
- Three major elements of the theory:
  - Carative factors
  - Transpersonal caring relationship
  - Caring occasion/caring moment



## 10 carative factors

- Humanistic-altruistic system of value.
- Faith-Hope.
- Sensitivity to self and others.
- Helping-trusting, human care relationship.
- Expressing positive and negative feelings.
- Creative problem-solving caring process.
- Transpersonal teaching-learning.
- Supportive, protective, and/or corrective mental, physical, societal, and spiritual environment.
- Human needs assistance.
- Existential-phenomenological-spiritual forces.



## What is meant by "measuring caring"?

- 21 instruments of Watson's Caring theory
  - CARE-Q and CARE/SAT and Modified CARE-Q
  - Caring Behaviors Inventory
  - Caring Dimensions Inventory
  - Caring Behaviors Assessment Tool
  - ...

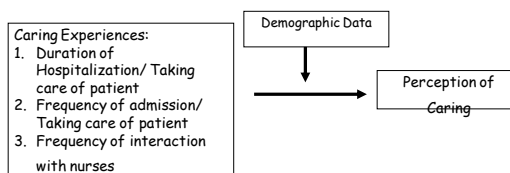


## Literature review

- Concept of caring
- Caring perception in Chinese culture
- Caring perception of Macau patient
- Caring factor survey 10-item Chinese version study

## Methodology

- Conceptual framework



## Methodology

### Research aims and objectives

- Assess perception of caring in nursing from patients and their caregivers;
- Explore the differences of caring perception among various wards;
- Analysis the relationship between caring experience and perception of care.

## Methodology

### Research instrument - Caring Factor Survey

- Incorporated Watson's theoretical concept of caritas (with explicit references to spirituality)
- Examines the human attribute of caritas
- Reported by the patients - indicates nurses' use of physical, mental, and spiritual caring behaviors
- Originally consisted of 20 statements (Cronbach's alpha .97-.98; well Content Validity; high Criterion Validity with CAT-II)
- Caring Factor Survey Chinese version
  - Face Validity - The face validity was established by four professional nursing experts who also helped to assess the content validity.
  - Content Validity - The item CVI ranged from **0.80 to 0.95** and the total CVI was **0.86**
- Likert-type scale ranging from 1 to 7; lower scores (1-3) indicate levels of disagreement, while 7 indicates the highest level of agreement

## Methodology

### Sample and recruitment

- Convenience sampling
- 193 participants
- 18 years old or above
- Able to communicate with Cantonese
- Free from cognitive problems
- Patients: admitted more than 2 days
- Caregivers: stayed with the patients at the hospital at least 2 hours per day

## Methodology

### Data collection

- Form 10th April to 30th May in 2010
- Collected by trained investigators
- Participants were invited to respond to each statement

## Ethical consideration

- Ethical approval was obtained from:
  - The research ethics committee of the Kiang Wu Nursing College; and
  - Kiang Wu hospital
- Informed consent form participants
- Anonymity and voluntary basis

## Statistical analysis

- SPSS software (SPSS 15.0)
- The scores of CCFS were indicated by mean and standard deviation (SD)
- Correlation is used for checking the items' relationship

## Results - Demographic data

Table 1. Summary of demographic data and CFS mean score (n = 193).

Variable		Frequency (%)
Gender	Male	40.9%
	Female	57.0%
Age	18-38 years old	19.2%
	39-58 years old	28.0%
	59-78 years old	33.2%
	79-98 years old	19.7%
Marital Status	Married	75.6%
	Single (include divorced/ widowed)	24.4%
Nationality	Chinese	93.2%
	Portuguese	4.4%
	Others	2.4%
	Cantonese	94.8%
Common language use	Mandarin	3.6%
	Others	1.6%

Table 1. Summary of demographic data and CFS mean score (n = 193).

Variable		Frequency (%)
Educational level	Primary school or below	46.6%
	High school	40.9%
	Diploma or above	12.0%
Department	Hospice and Palliative Care	1.6%
	Gynecology and Obstetrics	11.9%
	Internal medicine	53.9%
Hospitalization days of patients	Surgeical	32.6%
	1-3 days	26.9%
	4-7 days	34.7%
	8-14 days	21.2%
	15-30 days	9.8%
	31 days or above	4.7%

## Results - Caring Factor Survey

Table 2. Mean Score of CFS.

	N	Mean	S.D.
1 My nurses have established a helping and trusting relationship with me during my time here.	190	5.83	1.09
2 Every day I am here, I see that the care is provided with loving kindness.	192	5.77	1.06
3 When my nurses teach me something new, they teach me in a way that I can understand.	191	5.46	1.24
4 My nurses have created a healing environment that recognizes the connection between my body, mind, and spirit.	190	5.41	1.28
5 The nurses honored my own faith, helped instill hope, and respected my belief system as part of my care.	191	5.36	1.20
6 I feel like I can talk openly and honestly about what I am thinking, because those who are caring for me embrace my feelings, no matter what my feelings are.	190	5.25	1.29
7 As a team, my nurses are good at creative problem solving to meet my individual needs and requests.	192	5.18	1.20
8 My nurses are accepting and supportive of my beliefs regarding a higher power, which allows for the possibility of me and my family to heal.	188	5.06	1.24
9 My nurses encouraged me to practice my own individual spiritual beliefs as part of my self-caring and healing.	190	5.03	1.35
10 My nurses have responded to me as a whole person, helping to take care of all my needs and concerns.	190	4.86	1.58

## Results - Caring Factor Survey

Table 3. ANOVA of Caring Factor Survey

		Sums of Squares	df	Mean Square	F	Sig.
Department	Between Groups	42.609	38	1.121	1.218	.203
	Within Groups	137.200	149	.921		
	Total	179.809	187			
Gender	Between Groups	10.567	38	.278	1.179	.243
	Within Groups	34.210	145	.236		
	Total	44.777	183			
Age	Between Groups	39.736	38	1.046	1.005	.472
	Within Groups	155.073	149	1.041		
	Total	194.809	187			
Marital Status	Between Groups	42.234	38	1.111	1.108	.336
	Within Groups	148.515	148	1.003		
	Total	190.749	186			
Educational level	Between Groups	72.490	38	1.908	1.026	.440
	Within Groups	275.189	148	1.859		
	Total	347.679	186			
Hospitalization days of patients	Between Groups	66.210	38	1.742	1.554	.034**
	Within Groups	161.641	144	1.121		
	Total	227.850	182			

\*\*p < 0.05.

## Results - Caring Factor Survey

Table 3. ANOVA of Caring Factor Survey

		Sum of Squares	df	Mean Square	F	Sig.
Do the nurses introduce the ward environment to you?	Between Groups	9.635	38	.254	1.023	.445
	Within Groups	36.935	149	.248		
	Total	46.569	187			
Do you know which nurse(s) is responding to you?	Between Groups	5.556	38	.146	1.108	.325
	Within Groups	19.657	149	.132		
	Total	25.213	187			
Do you think you have enough communication with you responsibilities nurses?	Between Groups	10.298	38	.271	1.227	.195
	Within Groups	32.697	149	.221		
	Total	42.995	186			
Can nurses able to collect your conditions timely?	Between Groups	7.409	38	.195	1.564	.032**
	Within Groups	18.452	148	.125		
	Total	25.861	186			
Do you think the nurses understand what you need?	Between Groups	9.505	38	.250	2.737	.000**
	Within Groups	13.617	149	.091		
	Total	23.122	187			

\*\*p < 0.05

## Results - Caring Factor Survey

Table 3. ANOVA of Caring Factor Survey

		Sum of Squares	df	Mean Square	F	Sig.
Can nurses answer all of your questions?	Between Groups	7.838	38	.206	1.536	.037**
	Within Groups	20.013	149	.134		
	Total	27.851	187			
Apart from treatment, will the nurses walk around your bedsides?	Between Groups	17.429	38	.459	1.234	.189
	Within Groups	55.380	149	.372		
	Total	72.809	187			
Apart from treatment, will the nurses talk to you?	Between Groups	28.239	38	.743	1.532	.036**
	Within Groups	72.288	149	.485		
	Total	100.527	187			
Can the nurses protect your privacy?	Between Groups	.814	38	.021	.767	.803
	Within Groups	4.053	149	.027		
	Total	4.867	187			
Do you think there is a harmonious relationship between the nurses and patients?	Between Groups	31.830	38	.838	2.138	.001**
	Within Groups	57.977	148	.392		
	Total	89.807	186			

\*\*p < 0.05

## Discussion

- The scores in this study state an average level of patients' perception of caring.
- The patients tend to concern more on the physical wellness than the psychological, spiritual, and social aspects.
- The caring perception related to:
  - The days of hospitalization;
  - Observation patients' condition timely;
  - Understand patients' needs;
  - Answer patient's questions;
  - Communication to patients';
  - Sense of harmonious relationship in the ward.

## Limitations

- Spot of sampling & Sampling method
- Lack of local comparison with the past situation

## Conclusions

- The caring perception of in-patients in this study shows our clients agree with nursing contributions.
- Patients want to have more interpersonal communication to nurses.
- A local evidence for monitoring clinical nursing quality and designing nursing curriculum.

## Suggestions

- More studies should be conducted in exploring the essence of caring, the caring process and caring outcomes in the healthcare setting of Chinese society.
- Further studies can investigate the approach of integrating "caring" in the design of nursing curriculum in Macau.

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### 關懷因子測量表

說明：以下每題述句的同意程度分為5級，第5級表示非常同意，第1級表示非常不同意。請根據您對每題述句的同意程度，選擇出最能表達您的同意度情況。

	完全不同意	不同意	部份不同意	不確定	部份同意	同意	非常同意
	1	2	3	4	5	6	7
1							
2							
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Thank you for your attention!