

EFFECTIVENESS OF SELF INSTRUCTIONAL MODULE ON KNOWLEDGE REGARDING MANAGEMENT OF ICU PSYCHOSIS AMONG STAFF NURSES IN SELECTED HOSPITALS, SAWAI MADHOPUR DISTRICT

Mr. Bhupesh Sharma

HOD Mental Health Nursing, Ranthambhore College of Nursing, Sawai Madhopur, Rajasthan

ABSTRACT

Introduction : In India, one in eleven persons suffers from mental illness. The alarming increase in the number of mentally ill patients warrants urgent attention not only on curative aspect but also on preventive aspect. The factors like increasing population rate, industrialization, socio cultural changes and modernization precipitate increased stress and strain in everyday life. This in turn contributes to an increasing rate of mental health problems. It has been estimated that 85% to 95% of patients with mood disorder will suffer multiple recurrences of major depression and mania resulting in Revolving door syndrome. This throws light on the fact that the health care personnel have to prepare the mentally ill patients to function effectively in the community.

Methodology : The modified conceptual frame work for the present study was based on General System Model by Von Bertalanffy (1968). Quasi experimental one group pretest posttest research design was adopted for the present study. The Structured Knowledge Questionnaire was developed to collect the data. Pilot study was conducted among 15 nurses in Jeevan Surgical Hospital Sawai Madhopur from 2/10/2017 to 9/10/2017 to find the feasibility of the study. The main study was conducted at Riya Hospital Sawai Madhopur from 9/12/2017 to 19/06/2018 among 150 nurses who were selected by using purposive sampling technique and the data collected was analyzed and interpreted based on descriptive and inferential statistics.

Results : From the findings of the study it was clear that the mean post test knowledge score 32.52 with standard deviation of 6.07 was significantly higher than the mean pretest knowledge scores 15.97 with standard deviation of 3.19. There was significant association found between the pre test knowledge score of nurses with age, sex, marital status, professional qualification, position held, and exposure experience in caring ICU Psychosis patient at the level of $p < 0.05$.

Conclusion : The present study attempted to assess the effectiveness of Self Instructional Module (SIM) on knowledge of nurses regarding management of ICU Psychosis and found that the developed SIM was effective in improving the knowledge of nurses regarding management of ICU Psychosis.

Keywords : Effectiveness, Self Instructional Module, Knowledge, Psychosis

INTRODUCTION

A sound mind in a sound body" is a saying to which most people are familiar. Man in a psychosocial being and he has to deal with his physical, spiritual, social and environmental needs. Any disturbance in any of these areas affects the whole person. Health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity. When there is imbalance or disturbance in any of the systems people become sick. Mental disorder is defined as an illness with psychological or behavioral manifestations associated with significant distress and impaired functioning caused by a biological, social, psychological, genetic, physical or chemical disturbance. Care of

mentally ill is of utmost importance as in the case of physical illness. Health personnel should have a positive attitude towards mental illness and adequate knowledge to recognize and treat early symptoms. The emergence of psychiatric units in general hospitals is a recent trend in the field of psychiatry, especially in India. General Hospital psychiatric units handle all types of psychiatric problems, even those cases that were previously in the domain of the mental hospital. The current trend is complete integration of the mentally ill patient into the normal pattern of medical care with continuity of care from his family doctor, utilization of the general hospital and community resources .Mood disorders are fairly common in psychiatric disorders affecting about one in

ten thousand, during their lifetime. In developed countries the cost of treating Depression, a major category of mood disorders accounts for about one third of the cost for all mental disorders. Mental disorders account for nearly 12% of global burden of disease. By 2020 they will account for nearly 15% of disability adjusted life years lost of illness. The burden of mental disorders is maximal in young adults. The existing manpower in India includes approximately 1000-1500 qualified psychiatrists, 400-500 psychologists, and 200 to 300 psychiatric social workers and about 200 psychiatric nurses. It is very much evident from the data that psychiatric and para psychiatric services are inadequate in India, where the population has crossed one billion marks. Majority of the qualified personnel are concentrated in the urban areas. Hence even with an increased rate of training of specialized staff, there is little hope of reach-sustained portion of the rural population within, the next two decades without major changes in the approach to health care delivery.

METHODS

In the present study an evaluative approach was used to assess the knowledge of nurses regarding management of ICU Psychosis. The research design is an overall plan for addressing a research question. Quasi experimental one group pretest-post test design is adopted for the present study. In the present study the independent variable is the self instructional module on Management of ICU Psychosis. The dependent variable of the present study is knowledge of nurses regarding Management of ICU Psychosis. The population referred to as the target population, which represents the entire group or all the elements like individuals or objects that meet certain criteria for inclusion in the study. The total population of the present study comprised of 150 nurses working in Jeevan Surgical Hospital Sawai Madhopur and Riya Hospital Sawai Madhopur. Purposive sampling technique was adopted to select the samples. The samples were selected with the following predetermined criteria. After an extensive review of literature, discussion with the experts and based on the investigator's personal experience a Structured Knowledge Questionnaire regarding the management of ICU Psychosis was developed. The first draft of the tool consisted of 47 items. Based on the pre-testing, modifications and rearrangements of few items were done (4, 12, 14, and 26). Based on item analysis, discriminative index (0.3%)

and difficulty index (75%) two items (11 & 13) were deleted. Thus second draft of the tool consists of 45 items respectively. It consists of demographic variables such as age, sex, professional qualification, marital status, years of experience, income, position held, source of information, area of work, and experience in caring patient with ICU Psychosis. It consists of 45 knowledge items which includes meaning of ICU Psychosis (4), incidence and prevalence (4), causes (4), clinical manifestation (7), diagnostic measures (9), complications and prevention (5), treatment and nursing management (12). Scoring key was prepared for Part - I by coding the demographic variables. For Part - II, score '1' was awarded to correct response and '0' for wrong response in all items. Thus a total score of 45 were allotted.

The first draft of the SIM was based on the objectives of the study and given to 9 experts in the field of psychiatric Nursing and one psychiatrist along with objectives and rating scale. Based on their suggestions and recommendations (i.e. concise the content, explanations for abbreviations used and simplify some of the terms) the final draft of the SIM was prepared. The title of the Self Instructional Module is Management of ICU Psychosis. The data was collected from the samples by using structured knowledge questionnaire. The findings revealed that the most of the subjects had poor knowledge (70%) in pre test score and adequate knowledge (90%) in post test regarding management of ICU Psychosis. The tool and the subjects were found to be suitable and the study was found to be feasible. Structured knowledge questionnaire was administered to the selected subjects along with adequate explanation and the data was collected. Then the Self Instructional Module was distributed to the subjects on the same day. Each subject took 50-55 minutes to complete the knowledge questionnaire.

RESULTS

Maximum number of subjects 150(100%) were having adequate Knowledge regarding meaning, incidence and prevalence and 150(100%) subjects were having moderate knowledge in the concept of complication. The overall knowledge level shows that 50(33.33%) were having adequate knowledge and 100(66.66%) having moderate knowledge regarding Management of ICU psychosis. (Table 1)

Table 1 Level of knowledge of staff nurses regarding management of ICU psychosis in the Post-test**N= 150**

Knowledge items	Level of Knowledge					
	<50%		50-75%		>75%	
	F	%	F	%	F	%
ICU Psychosis- Meaning and definition					150	100
Incidence & prevalence					150	100
Causes			50	33.33	100	66.66
Signs & symptoms	15	10	90	60	45	30
Diagnostic measures	25	16.66	80	53.33	45	30
Complication & prevention					150	100
Treatment and Nursing management	15	10	85	56.66	50	33.33
Overall knowledge score			100	66.66	50	33.33

The overall knowledge shows that there was improvement regarding the Management of ICU Psychosis with the 't' value of 25.09, which is significance at the level of $P < 0.001$. This evidenced that the developed Self instructional module was effective in increasing the knowledge level regarding Management of ICU Psychosis.(Table 2)

Table 2 Area wise pre and post test knowledge scores of staff nurses on Management of ICU Psychosis**N = 150**

S.No	Knowledge Variables	Pre-test mean	Post-test mean	Paired 't' value	Inference
1	ICU Psychosis- Meaning and definition	3	3.7	4.92	S
2	Incidence & prevalence	1.93	3.76	10.76	S
3	Causes	0.66	2.76	14.89	S
4	Signs & symptoms	3.16	4.8	6.45	S
5	Diagnostic measures	2.83	5.9	9.74	S
6	Complication & prevention	1.43	3.7	12.99	S
7	Treatment and Nursing management	2.96	7.9	15.47	S
	Over all knowledge	15.97	32.52	25.09	S

Significant: $P < 0.001$ **DISCUSSION**

The distribution of the subjects by age revealed that maximum number of The age wise distribution of subjects that 48 (32%) staff nurses were in the age group of 21-25 years, 32 (21.34%) were in the age group of 26-30 years, 25(16.66%) were in the age group of 31-35 years, 25(16.66%) were in the age group of 36-40 years and remaining 20 (13.34%) were in the age group of >41yrs years. Regarding gender majority of subjects that 105 (70%) staff nurses were males and 45 staff nurses (30%) were females. With regard to marital status majority of subjects that 120 (80%) patients were married, 30 (20%)

were unmarried. As per the statistics the majority of the subjects are married. In relation to educational qualification most of the subjects that staff nurses were GNM qualification , 35 (23.33%) had B.Sc. [N] qualification, 18 (12.0%) were had PB B.Sc.[N] qualification, 2 (1.34%) had M.Sc. [N]qualification and above according to the statistics majority of them are no formal education and few are literates. Pertaining to year of experience most of subjects that 20 (13.34%) staff nurses were <1 year of Experience, 42 (28%) had 1-2 year of Experience, 30 (20.0%) were had 2-3 year of Experience, 25 (16.66%) had 3-4 year of Experience, 15 (10%) had 4-5 year of

Experience and 18 (12%) had 5yrs and above. In relation to area of work in most of management of ICU Psychosis majority of subjects that 42 (28%) staff nurses work area in Medical ICU were , 20 (13.34%) had staff nurses work area in Critical care unit were , 15 (10.0%) were had staff nurses work area in Psychiatric ward, 18 (12%) had staff nurses work area in Post OP ward, 25 (16.66%) had staff nurses work area in Emergency and 30(20%) had staff nurses work area in Surgical ICU 5yrs. With respect to position held by the samples most of the subjects that 1 (0.8%) Nursing superintendent position had, 25 (16.6%) had Ward in charge, 124 (82.6%) were had staff nurses position.

In relation to income most of subjects that 80 (53.34%) staff nurses income group of 20000-30000, 25 (16.66%) staff nurses income group of 30001-45000, were 40 (26.66%) staff nurses income group of 45001-60000 and 5 (3.34%) staff nurses income group of 60001 & above. Regarding to Sources of information majority of subjects that 45 (30.0%) staff nurses were getting sources information through magazines/ Journals, 27 (18.0%) were from In service education, 25 (16.66%) were from health personnels, 18 (12.0%) were from Television / radio, 15 (10.0%) were from as part of academics and 20 (13.34%) were getting through field visit .

In relation to experience in caring ICU Psychosis patient that 45 (30.0%) staff nurses were experience in caring ICU Psychosis patient, 105 (70%) had experience in caring ICU Psychosis patient. The overall mean knowledge score obtained by the subjects was 15.97 with standard deviation of 3.19 in the pre test. The level of knowledge distribution shows that all the subjects 150 (100%) had inadequate knowledge on management of ICU Psychosis in the pre test. The findings of the present study is consistent with the findings of Voyer , Cole , McCusker , Belzile (2006) that the mean pre test knowledge score was 16.6 The overall mean knowledge score obtained by the subjects was 32.52 with standard deviation of 6.07 in the post test. The level of knowledge distribution shows that all the subjects 150 (100%) were having moderate knowledge on management of ICU Psychosis in the post test. The findings of the present study is consistent with the findings of Voyer , Cole , McCusker , Belzile (2006) that the mean post test knowledge score was 29.28 The overall mean knowledge score (72.26%) obtained by the subjects in the post test was higher than the mean

knowledge scores (35.48%) in the pre test and with the improvement mean score of 16.55. There was significant difference between the pre and post test knowledge score with the 't' value of 25.09 and found to be significant at the level of $p < 0.001$. The findings of the present study is consistent with the study findings of Voyer , Cole , McCusker , Belzile (2006) the mean post test knowledge score 29.28 was higher than the mean pre test knowledge score 16.6 at the level of $P < 0.0154$ and this indicates the self instructional module was effective in improving the knowledge of subjects on management of ICU Psychosis. Hence the research hypothesis stated that there will be significant difference between the pre and post test knowledge scores of subjects regarding management of ICU Psychosis was accepted. Association of the pre test knowledge score of the subjects with majority of selected demographic variables evidenced that there was statistically significant association at the level of $p < 0.05$. Hence the research hypothesis stated that there will be significant association between the pre test knowledge score with selected demographic variables was accepted.

CONCLUSION

The present study assessed the knowledge of subjects on management of ICU Psychosis and found that most of the subjects 150 (100%) had inadequate knowledge in the pre test and maximum number of subjects 100 (66.66%) had moderate knowledge in the post test and concluded that there was a significant improvement in subjects knowledge in the post test after administration of Self Instructional Module. Thus Self Instructional Module is effective in improving the knowledge of subjects on management of ICU Psychosis. By provision of this Self- Instructional Module in critical care area and recovery ward will promote quality and competent care which will help the nurse to prevent and reduce the incidence of ICU Psychosis as well as mortality due to same. Staff nurses have expressed that they have been enabled to reflect on their own performance; at their own pace and that they have enjoyed active participation in learning process. Significant perceived learning among nurses took place in all aspects of Self Instructional Module regarding management of ICU Psychosis.

Hence, the developed SIM on management of ICU Psychosis is instructionally effective, appropriate and feasible can be used in the hospitals, to motivate and help the nurses to update the knowledge in the aspect of management of ICU Psychosis.

REFERENCES :

1. Divatia. J V Critical Care delivery in ICU's in India. 2006; 10(1) : 53-63.
2. Hansell H N The behavioral effects of noise on man : the patient with ICU Psychosis. 1984 Jan; 13(1) : 59-65.
3. Dyson M ICU Psychosis, The therapeutic nurse-patient relationship and influence of intensive care setting : analysis of interrelating factors. Journal of clinical nursing. 1999 May; 8(3) : 284-290.
4. Gail W S, Michele T L Principles and practice of psychiatric nursing. 8th ed. Missouri : Mosby Publication; 2005. P.328-63.
5. Sreevani R A guide to mental health and psychiatric nursing. 1st ed. New Delhi : Jaypee brothers; 2003. P. 48-60.
6. Dr. Mrs. K. Lalitha. Mental health and psychiatric nursing - An Indian perspective. 1st ed. Bangalore : VMG book house publishers; 2007. P. 306-45.
7. Ahuja N A short text book of psychiatry. 5th ed. New Delhi : Jaypee brothers medical publishers; 2005. P. 70-84.
8. Sudhamaniamma S ICU Psychosis- Nurses challenge. Nursing journal of India. 2001 November; 92(11) : 249-250.
9. Cosentino W B Keeping the ICU-induced demons at bay. Nursing spectrum career management. 2002; April 12th.
10. Roberts B Intensive and critical care nursing. Screening for delirium in an adult ICU. 2004 August; 20(4) : 206-213.
11. Pun B T, E.W. Ely. The importance of diagnosing and managing ICU Delirium. 2007 Aug; 132(2) : 624-636.

