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***The comparison of Nurses' individual problems in C.C.U. and Emergency wards***

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**Authors:**

*Dr. Seyed Hbibolah Kavari. Health management (Ph.D.),*

*Dr. Ali keshtkaran*

*Principal lecturers of the school of management & medical Information science Shiraz medical university, Shiraz, Iran*

**Correspondence:**

**Tel:** 98-711-2296031-32

**Fax:** 98-711-2288607

**Email:** Kavarih @ sums. ac.ir, kavari 2000@ yahoo.com

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**INTRODUCTION**

Studies reveal the most common problems affecting people's health are Heart -Respiratory diseases.(1&2) In fact these problems are the most serious factors that threaten people's health and life.(3&4) . According to existing statistical reports, most mortality in the world is related to these matters. Of course these matters have a heavy influence on the community and human resources. In addition society pays an enormous cost in people's protection and treatment (5).

When patients or transported to emergency or C.C.U ward, they are not well and they have so many difficulties so they need high care of nurses (6). Making a good decision in these situations is necessary and very important in saving people's life, and of course it is one aspect of people's rights (7). Patients who have heart problems are the patients who need much more protection. Immediate attention is very important in such cases (6). Although nurses do not have much time and they are under pressure they should concentrate their attention on the needs of such patients.

Having more relationships between nurses and patients, patient changeable situations, incompetent nurses, lack of experts, knowledge & experienced nurses, rotational shifts, stressful factors, weak communication and lack of necessary equipment make the nurses confused and these matters lead to loss of their self-confidence and restrict their work. (8).

Following these matters nurses become disappointed, exhausted, isolated, and depressed and they cannot make effective decisions at suitable time (9).

Nurses have so many duties. Some of these duties are: assigning the nature of problem, determining how to evaluate the special problem and its complex situation, doing constant treatment and so on. (10) some factors like using the knowledge, way of thinking about valuable and important matters, being familiar with standards and methods have its own place in nurses' decisions (11). being skillful, having the ability to prevail over the problem and disturbance, being in good mood and having enough energy to take care of the patients are the key matters that lead the nurses to be successful in their works (12).

With this research we try to recognize and clarify nurses' problems and finding solutions for them, so that more patients were able to receive good nursing care.

## **MATERIALS AND METHODS**

This survey was conducted on 68 nurses who work on C.C.U and emergency wards in Shiraz University of medical sciences, in Namazi, Faghihi and Chamran hospitals.

Among these 68 nurses, 48 of them are worked in C.C.U and 20, worked in emergency wards. The information gathered by a questionnaire that contained 7 questions about demography ( age, sex, work rotations, experience, ward, time of working in this ward and training courses ) and 18 questions about individual problems (awareness, skill, experience, motivation).

This study uses the absolute and relative frequency distribution table, average and standard deviation for descriptive statistics. It also uses the X<sup>2</sup> test for combination of 2 groups in quality matters and Cochran test for exact demographic characteristics.

In some cases using the statistical tests was not possible because the statistical data was insufficient so the grades were computed as: NO = 0, to some extent = 1, much = 2. If computed quantity was less than average, the person is considered as no problem case and goes under (do not have) group. Whenever computed quantity was more than average, the person is considered as: problematic case and goes under (have) group.

## **FINDINGS**

For this research we worked on 2 wards: C.C.U and Emergency ward. Findings in these 2 wards show that the age of people who worked in Emergency ward were between 26-30 & 31-35 while those who worked in C.C.U were between 36-41 (Table 1) in addition most nurses were women and the number of nurses who work in emergency ward were more than those who work in C.C.U. All of these nurses have rotational shifts in 2 wards. Most of the nurses who worked in Emergency ward have 1-5 years of service and those who worked in C.C.U have 1-5 or 6-10 years of service. All of the understudy nurses have worked more than 1 year in these wards. It is worthy of mention that the number of nurses who work in Emergency ward is more than those who work in C.C.U.

The common point is that these mentioned nurses hadnot passed the training course of C.P.R operations.

The absolute & relative frequency distribution of understudy nurses according to their age for determination and comparison of their individual problems in C.C.U & Emergency wards were shown in table 1.

Findings show that in mentioned wards there was no complaint and no problem about "Finding the suitable place for heart massage." and "doing massage." it is worthy to mention that the nurses who work in C.C.U have fewer problems in this area.

Caring for none of these things by principals and other fellow members was the most mentioned problem that you could see in both group answers. The comparison of 2 wards shows that the problems in Emergency ward are more than those in C.C.U. (Table 2)

When we review and examine the questions we cannot find any significant differences between the 2 groups in regard to these questions: having low experience in doing C.P.R, being tired and disr=tressed because of doing C.P.R, prevailing over hopelessness and feeling sinful because of not doing the C.P.R operation well; prevailing over pressure of heavy responsibility of doing C.P.R and accepting the colleagues' criticism.

83 percent of nurses who worked in emergency ward were 41-45 years old and 75 percent of them who work in C.C.U wards are 26-30 years old, and the most problem were seen among these mentioned groups. (Table 2)

The majority of understudy nurses were women (49% in emergency & 46% in C.C.U) and the shift rotation were their worst problems.

100% of those who work in Emergency ward and have 26-30 years of service and 67% of those who work in C.C.U and have 1-5 years of service face difficulties and have problems.

**Table 1**

Emergency ward C.C.U				
Age	number	percent	Number	Percent
21-25	11	23	1	5
26-30	14	29	4	20
31-35	14	29	6	30
36-40	3	6.25	7	35
41-45	6	12.5	-	-
46-50	-	-	1	5
51-55	-	-	-	5
Total	48	100	20	100

50% of those who work in emergency ward with one year of service and 40% of those who work in C.C.U with more than one year of service have problem.

50% of nurses who work in emergency ward and pass the training course and 37 % of those who work in C.C.U and did not pass the training course have problem.

It is worthy to mention that all of these matters and the relationship of individual problems among nurses did not show any significant and meaningful differences and also omitting the individual characteristics do not change anything.

## **DISCUSSION**

According to health and remedial criteria's, the most important factors in people's morbidity and mortality are Heart-Respiratory disease and among this disease cardiac arrest is the most common. So for solving such problems we should act according to scientific method and legal standards.

Certainly having such problems in critical wards need effective, capable, skillful and scientific man power that has enough power to control the situation (13).

The first groups after nurses who see the patients are remedial personnel and they should have mentioned factors and find the best and suitable way for solving and controlling the problem (10). Finding a big gap between science and work is the result of this research. It means that what they learned in their books is different from what they see in real life, and such differences influence their way of working and can threaten the people's lives and lead to problems that cannot be compensated. Much investigation has been done in this regard and the result of all is the same (14).

So beside paying more attention to this matter and creating necessary motivation for learning new things and providing experiences in taking care of patients, we should prize the nurses' work and develop principals' and nurses' educational planners attention toward these factors. In 2 lots of research you can see that there is an emphasis on these two matters. (15&16)

As a result it is necessary to have theoretical & practical educational classes, constantly, during the year, and nurses were evaluated according to their knowledge & skills (17).

By giving suitable and necessary services, you can make the society healthy and wealthy.

Findings in this study show that there is no attention paid to the nurses by principals so they become discouraged and they face many difficulties. So such studying should make the principals pay more attention to their problems and their works. You can see such emphasis on gullo & hudak studying too (10).

Research shows that being tired of working, and having no motivation to work well is because of not being hopeful and feeling sinful about doing something wrong. When we look at such research and compare it with this research, we see that the result of all o is the same.

Stressful jobs and environment mitigate the people's self-confidence and having high obligations in this regard leads to them being exhausted and not having enough emotional motivation to work well (8&19). As a whole motivation and conception problems show disinclination. Moreover because of seeing some meaningful differences in motivation and conception questions among emergency & C.C.U wards, we think that the suitable and precise research needs to be done by the mentioned hospital principals.

**TABLE 2 Absolute frequency distribution of mentioned units according to their age in Emergency and C.C.U wards**

List of some nurses' problems	Emergency ward				C.C.U Ward				Result of difference in Statistical test
	NO	TO SOME EXTENT	MUCH	TOTAL	NO	TO SOME EXTENT	MUCH	TOTAL	
<b>DETERMINING THE SUITABLE PLACE FOR HEART MASSAGE</b>	30(62.5)	12(25)	6(12.5)	48(100)	15(75)	3(15)	2(10)	20(100)	N*S
<b>OPENING THE RESPIRATORY CHANNEL OBSTACLES</b>	11(23)	27(56)	10(21)	48(100)	3(15)	15(75)	2(10)	20(100)	NS
<b>DOING THE HEART MASSAGE</b>	28(58)	13(27)	7(15)	48(100)	15(75)	4(20)	1(5)	20(100)	NS
<b>LOW EXPERIENCE IN C.P.R</b>	10(21)	37(77)	1(2)	48(100)	9(45)	9(45)	2(10)	20(100)	N2=4.87 P< 5%
<b>PREVAILING OVER THE EXHAUSTED &amp; EXCITEMENT OF C.P.R</b>	15(31)	28(58)	5(11)	48(100)	12(60)	7(35)	1(5)	20(100)	X2=11.25 P<5%
<b>PREVAILING OVER THE PRESSURE OF C.P.R RESPONSIBILITY</b>	9(19)	33(69)	6(12)	48(100)	12(60)	5(25)	3(15)	20(100)	NS
<b>FILLING A GAP BETWEEN SCIENCE &amp; ITS USAGE IN REAL LIFE</b>	7(15)	39(81)	2(4)	48(100)	7(35)	11(55)	2(10)	20(100)	NS
<b>NO ENCOURAGEMENT FROM PRINCIPALS &amp; CO-WORKERS</b>	7(15)	18(38)	23(47)	48(100)	5(25)	6(30)	9(45)	20(100)	X2=4.30 P<5%
<b>THE ABILITY TO ACCEPTING THE COLLEAGUES' CRITICISM</b>	18(38)	25(52)	5(10)	48(100)	13(65)	6(30)	1(5)	20(100)	NOT SIGNIFICANT

In addition short and long term training of all the people in the society is needed, because the number of people who died because of heart – respiratory problems, is high. If the people know how to behave in such situation, the possibility of mortality become less (20).

Moreover, the principals should have constant education in effective personnel resources, budget facilities and economical matters, so, the rate of mortality among these patients who need C.P.R. becomes less and less.

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