



Effectiveness of Skill Training Programme for Caregivers of The Bedridden patients.

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ABSTRACT

Providing care by a family member to the patient in need is an age-old act of kindness, love and loyalty. Family members provide an estimated 90% of long term care in India.¹ Family carers often face practical problems related to caring technique, to carry out the caregiving responsibility.¹

Material and methods: An evaluatory approach with one group pre test-post test design was used for the study. The sample consisted of 50 caregivers of bedridden patients, selected using purposive sampling technique. The skill training programme was administered after the pre-test with demonstration of changing position, back care and changing the draw sheet. A post- test was conducted on the 5th day using the same tool and an opinionnaire was administered to know the opinion of the caregivers regarding the training programme. **Result:** The mean post test skill score = 47 was higher than the mean pretest skill score ($\bar{X}_1 = 19.2$). The mean percentage skill score of post test was maximum in the area of "back care" (83%) and minimum in the area of "changing the position" (76%) and "changing the draw sheet" (76%). The computed 't' value $t_{49} = 40.3$ and p value 0.001 showed a significant difference between the pretest and post-test skill score, indicated that the skill training programme was effective in increasing the skill level of the caregiver. There was no significant association between the pretest skill scores and selected demographic variables of the caregivers and there was a good opinion about the training programme. **Conclusion:** Findings of the study have shown that the skill training programme is an effective training strategy in improving the skill of the caregivers .

KEYWORDS

Skill; Skill training programme; Effectiveness; Caregivers; Bedridden patients.

INTRODUCTION

There are some conditions like stroke, paralysis of limbs and head injury when a patient might remain bed-ridden for days to weeks. Such patients require constant care to avoid formation of bed sores, pneumonia, infection of urine tract, constipation, etc.² Patient and family-centred care is about providing respectful, compassionate, culturally responsive care that meets the needs, values, beliefs, and preferences of patients and their family members. It is important for family caregivers to know and manage or avoid the health risks.³

Objectives of the Study

1. To determine the level of skill in the care of bedridden patients among the caregivers using an observation checklist,
2. To find the effectiveness of the skill training programme on care of the bedridden patients among the care givers,
3. To determine the association between the skill score of the care givers and selected demographic variables, and to elicit the opinion of the caregivers regarding the skill training programme.

MATERIALS AND METHODS:

1. **Setting:** The study was conducted in Medical Surgical wards of Father Muller Medical College Hospital, Mangalore
2. **Research approach:** Evaluatory approach was used.
3. **Research design:** Pre-experimental one group pre test post test design.
4. **Sample:** 50 care givers of 50 bedridden patients.
5. **Sampling technique:** Purposive sampling method.
6. **Inclusion criteria:**
 - Caregivers in the age group of 20 to 60 years.
 - Close relatives of the bedridden patients
 - Caregivers who know to read and understand Kannada and English.
7. **Exclusion Criteria**
 - Caregivers of the critically ill patients
 - Caregivers of the bedridden patients who are not willing to

participate in the study.

- Caregivers of the bedridden patients who are above the age of 60 years.

8. Data collection instruments:

Tool I: Baseline Proforma

Caregiver's profile consisted of 5 items such as age, gender, education status, relationship with the patient, prior experience of staying with the patient in the hospital. Bedridden patient's profile consisted of 4 items such as age, gender, diagnosis and duration of the stay in the hospital.

Tool II: Observation Checklist

Structured observation checklist to assess the skill of the caregivers in providing care consisted of 4 areas, preparation of the articles, changing the position, providing back care , changing the draw sheet.

Tool III: Opinionnaire

A 4-point rating scale with options "strongly agree", "agree", "disagree", "strongly disagree". The scale consisted of both the positive and reversely scored items.

MAJOR FINDINGS OF THE STUDY:

The data was analyzed and was presented under the following headings:

Section 1: Sample characteristics

Section 2: Skill level of the caregivers

Section 3: Effectiveness of the skill training programme

Section 4: Association between the pretest skill score and selected demographic variables.

Section 5: Opinion about the training programme.

Section 1: Sample Characteristics

- Among the 50 Caregivers, 14 (28%) were in the age group of 31-40, 13 (26%) were in 51-60, 12 (24%) in 21-30 and 11 (22%) in 41-50.

- Majority of the subjects 38 (76%) were female caregivers, and 12 (24%) were male caregivers.
- Among the 50 caregivers 16 (32%) were with primary, 17 (34%) were high school, 11 (22%) were pre university and 6 (12%) were graduates or diploma.
- Among all the subjects, 26 (52%) of the subjects were son/daughter, 14 (28%) were wife/husband, and 10 (20%) were father/mother.
- Among the 50 subjects, 14 (28%) had prior experience of staying in the hospital and 36 (72%) of the caregivers did not have prior experience of staying in the hospital.
- Majority 31 (62%) of the patients were males and 19 (38%) were females
- Among the patients, majority of the patients 33 (66%) were under neurological disorders, 6 (12%) had respiratory diseases, 5 (10%) had endocrine disorders and 3 (6%) had cancer and 2 (4%) had orthopedic disorder and 1 (2%) had cardiac disorder.
- Majority of the patients 41 (82%) were hospitalized since 6 -10 days, 8 (16%) were hospitalized since 1-5 days and 1 (2%) were hospitalized since 11-15 days.

Section II: Skill Level of the Caregivers

The data in Table 1 and Figure 1 shows that the post test Ogive lies to the right of the pre test Ogive over the entire range. The 50th percentile shows that the median score of post test (M= 49) was higher than the median score of the pretest (M=18). This indicates that the post test skill score was consistently higher than the pretest score

In pretest all the subjects 50 (100%) had low skill score. In the post- test, most of the subjects 28 (76%) showed high skill score and 12 (24%) showed moderate skill score and the mean percentage of the post test skill score (95%) is higher than that of the mean percentage of the pretest skill score (38%).

The data in Table 2 and Figure 2 shows that the mean percentage of the pretest skill score in the area of "back care" is 36%, and 29.3% in "changing the draw sheet" and 23% in "changing the position". Whereas, in the post-test, the mean percentage of skill score in the area of "back care" is 83% and 76 % in "changing the position", and 76% in 'changing the draw sheet'. This shows that the skill level is higher in post-test when compared to the pretest.

Section III: Effectiveness of the Skill Training Programme

The mean post test skill score= 47) was higher than the mean pre test skill score

=19.2). The computed 't' value $t_{49}=40.3$, $p=0.001$ was higher than the table value $t_{49}=2.02$, $p<0.05$. This indicates that the Skill Training Programme was effective in increasing the skill level of the care givers on caring the bedridden patients.

Further the areawise mean percentage skill score, mean difference, standard deviation, and t value on the pretest and post test was computed. The computed 't' value in the area of "changing the position" $t_{49}=20$, back care $t_{49}=30$, changing the draw sheet $t_{49}= 28$, $p=0.001$ was higher than the tabled value $t_{49}=2.02$, $p<0.05$. Hence it shows that the skill training programme was effective in increasing the skill of the caregivers in different areas of skill in taking care of the bedridden patients.

Section IV: Association between Pretest skill Score and Selected Demographic Variables

The chi square value of age ($\chi^2_3 = 1.50$), gender ($\chi^2_1=1.31$), education status ($\chi^2_3 = 2.92$), relationship with patient ($\chi^2_2= 2.92$), prior experience of staying in the hospital ($\chi^2_1= 2.1$), duration of stay in the hospital ($\chi^2_1= 0.69$) $p= 0.05$ are lower than the table values, ($\chi^2_1= 3.84$, $\chi^2_2=5.99$, $\chi^2_3 =7.82$) Hence, it was inferred that there was no association between the skill score and selected demographic variables of the caregivers.

Section V: Opinion of the Caregiver Regarding the Skill Training Programme

Most of the subjects 45 (90%) strongly agreed that the skill training was easy to understand, and 47 (94%) strongly agreed that they will follow this technique in taking care of their patients. None of them had any negative opinion about the skill training programme.

DISCUSSION

In the present study, the mean post test skill scores were higher than the mean pretest skill score. The computed 't' value ($t_{49}= 40.3$ and p value = 0.001)showed that there was a significant difference between the pretest and post test skill score. The findings inferred that the skill training programme was effective in improving the skill of the care givers regarding care of the bedridden patient.

The findings of the present study is congruent with the findings of the study conducted in El Wafa Medical Rehabilitation Hospital, which showed the significant difference between mean pre-test and post test skill score suggesting that the training programme was effective.⁴

CONCLUSION

From the present study it was found that Skill Training Programme was a very effective method of training. The traditional system of nursing education considers nursing as giving care and not to make the patient or family member participate and involve in the care. Therefore, it is a felt need for changing the knowledge, practice and attitude of nursing towards helping patients become partners in their health care.

Figure 1: Ogive Representing the Pre and Post test Skill Score of the Subjects.

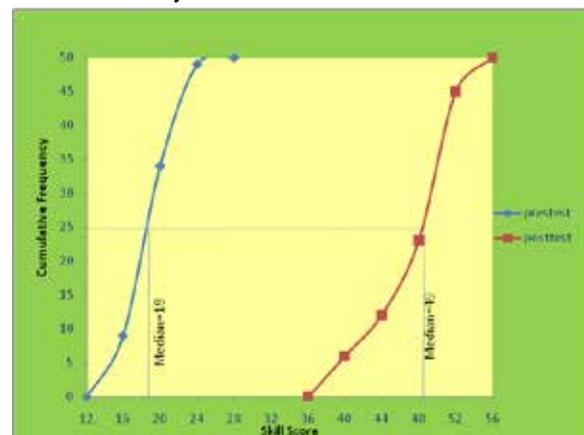


Table 1: Distribution of Subjects According to their Pretest and Post test Skill Score n=50

Skill Score	Pretest		Posttest			
	f	f%	cf	f	f%	cf
9-12	-	-	0	-	-	-
13-16	9	18	9	-	-	-
17-20	25	50	34	-	-	-
21-24	15	30	49	-	-	-
25-28	1	2	50	-	-	-
29-32	-	-	-	0	0	0
33-36	-	-	-	6	12	6
37-40	-	-	-	6	12	12
41-44	-	-	-	11	22	23
45-48	-	-	-	22	44	45
49-52	-	-	-	5	10	50
53-56	-	-	-	-	-	-

Maximum score= 60

Figure 2: Area-wise Distribution of the Skill Score of the Subjects.

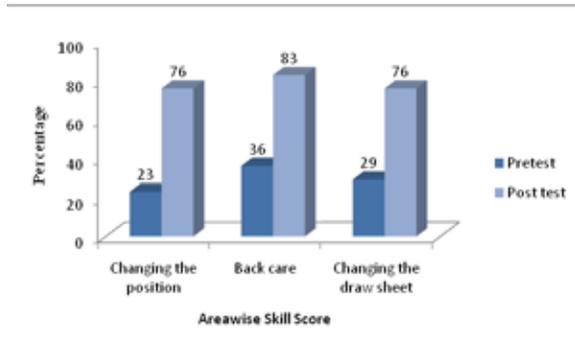


Table2. Area-wise Distribution of Subjects in terms of mean SD and mean percentage. n=50

Areas	Max Score	Pretest			Post test		
		Mean	SD	Mean %	Mean	SD	Mean %
Position	10	2.34	1.15	23	7.6	1.4	76
Back care	26	9.34	2.15	36	21.5	2.28	83
Changing the Draw Sheet	22	6.46	1.9	29.3	16.7	2.15	76

Maximum Score= 60

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