Effectiveness of Structured Teaching Program on Identification and Management of Psychiatric Emergencies in Hospital among Nursing Intern Students of KLE'S Dr. Prabhakar Kore Charitable Hospital, Belagavi, Karnataka

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ABSTRACT

Background: Emergency is a situation that's present in all areas of health services; Psychiatric area is no exception to it.

Aims and objectives: A study was conducted to assess the level of knowledge regarding identification and management of psychiatric emergencies among nursing intern students, to evaluate the effectiveness of structured teaching programme, to find out association between pre-test scores with selected demographical variables among nursing intern student.

Material and Method: Thirty nursing intern students assessed. They were assessed for the level of knowledge regarding identification and management of psychiatric emergency by self structured questionnaires on first day pre-test followed by structured teaching programme for one hour. The post-test was conducted on seventh day by using same tool.

Results: Statistically significant effectiveness of structured teaching program was found. There was no significant association was found with selected demographical and knowledge score.

Conclusion: Our findings denotes that the effectiveness of structured teaching programme help to gain the knowledge score on identification and management of psychiatric emergency. It is essential for nurse to develop knowledge regarding identification and management of psychiatric emergency in order to avoid life threatening complication in clients as well as to individual.

Key words: Structured teaching programme, Knowledge, nursing intern students.

INTRODUCTION

Emergency psychiatry is the clinical application of psychiatry in emergency settings. The place where emergency psychiatric services are delivered are commonly referred to as Psychiatric Emergency Services, Psychiatric Emergency Care Centres, or Comprehensive Psychiatric Emergency Programmes. [1] Various psychiatric emergencies are seen at unearthly hours in the hospital like Suicide , Agitated and Violent patients, Panic attacks, Catatonic stupor, Hysterical attacks, Transient situational disturbance, Grief reaction, Rape, Disaster, Delirium tremens, Acute drug induced Extra pyramidal syndrome and Drug toxicity. [2,3]

Individuals may arrive in psychiatric emergency service settings through their own voluntary request, a referral from another health professional, or through involuntary commitment. Care of patients requiring psychiatric intervention usually encompasses crisis stabilization of many serious and potentially life-threatening conditions which could include acute or chronic mental disorders or symptoms similar to those conditions. [4] In the year 2000, approximately one million people died from suicide: a "global" mortality rate of 16 per 100,000, or one death every 40 seconds. [5] In the last 45 years suicide rates have increased by 60% worldwide, nearly 30% of all suicides worldwide occur in India and China. India alone contributes about 10% of suicide in the world. Its rate is 10.5% per 1, 00,000 populations in 2006 registered a 67% increase over the value of 1980. About 21 persons die by suicide in Karnataka every day (2006). [6] Violence,

another psychiatric emergency is a significant problem in many hospitals. [7] A study identified the incidence of violence by patients towards nurses in two Ed's (Emergency departments), Of the 71 ED nurses who participated, 50 (70%) reported 110 episodes of violence in a five-month period. [8] That is approximately five violent incidents per week. Identification of trends and patterns of violence is necessary so that better health care planning and service provision as well as effective preventative and safe strategies for nurses in the workplace can be implemented. [9]

MATERIALS AND METHODS

The one group pre test post test pre-experimental design was used. The present study was conducted on 30 nursing intern students of KLE'S Dr. Prabhakar Kore Charitable hospital Belagavi. Approved by ethical committee of Institute of nursing sciences Belagavi was obtained. The nature of study was explained to the subjects and written consent was obtained. The subjects were selected by non probability convenient sampling method based on inclusion criteria. The self structured questionnaire was used in data collection. The tool consists of five questions to obtain socio demographic data, and twenty items to assess the level of knowledge regarding identification and management of psychiatric emergency. The tool was validated by seven experts in field of Psychiatric nursing. Pre-test was conducted by using self structured questionnaire followed by administration of structured teaching programme on same day of pre-test. The post test was conducted on seventh day of pre-test. The collected data was organized and analyzed based on the objectives by using descriptive and inferential statistics.

RESULTS

Findings related to socio demographic variables: majority of intern students 29(96.6%) were between the age group of 20 to 25 years, The intern students 3(10%) were males and 27(90%) were females. Highest percentage 17 (56.6%) belongs to Christian, 26(86.6%) nursing students were B.Sc Nursing and 4 (13.4%) G.N.M, majority 25(83.4%) of intern students were not attending special training in psychiatric emergency management.

Findings related to pre-test and post-test knowledge scores: mean of pre test is 6.06, median 6, mode 5.88, standard deviation2.24 and ranges is 7 and post test mean 13.53, median 14, mode 14.94, standard deviation 3.47 and ranges is 12 this reveals significant gain in knowledge of mean, median, mode and range scores after administering Structured Teaching Programme (STP).

Effectiveness of Structured Teaching Programme (STP) in terms of gain in post test knowledge scores: calculated paired 't' value (t calculated =12.30) is greater than tabulated value (t calculated = 2.045). Hence H_1 is accepted. (Table-1) This indicates that the gain in knowledge score is statistically significant at p< 0.05levels. Therefore, structured teaching programme (STP) on identification and management of psychiatric emergency is effective to improve the knowledge of intern students.

Table 1: Mean difference, standard error of difference (SEd) and paired 't' test values of knowledge scores of subject. n=30

Mean difference	Standard error	Paired T-Test	
		Calculated	Tabulated
7.47	0.56	12.30	2.045
	(p>0.05)	t=29	

Association between pre-test knowledge scores with selected demographic variables: There is no significant association between knowledge scores and special training in psychiatric emergency management.

DISCUSSION

Mean of pre test is 6.06, median 6, mode 5.88, standard deviation2.24 and ranges is 7 and post test mean 13.53, median 14, mode 14.94, standard deviation 3.47 and ranges is 12 this reveals significant gain in

knowledge of mean, median, mode and range scores after administering Structured Teaching Programme (STP). In support to our study an experimental study was conducted on effectiveness of SIM on nurse's management of violent client in 2007 at Mangalore. The researcher applied a structured questionnaire on 30 staff nurses. The results showed that mean effectiveness was increased by 7.16% with a SD of 2.It was concluded that the SIM was highly effective in improving the knowledge of nursing personnel on the management of violent patients. [10]

CONCLUSION

Effective management of psychiatric emergencies has emerged as an important area in the field of mental health. Nursing students with their training in psychodynamics, path physiology, physical assessment, pharmacology, crisis intervention, and psychotherapy, are the ideal practitioners to respond to the treatment needs of the individual and family experiencing a psychiatric emergency. During the researcher's clinical experience, it has been observed that the psychiatric emergencies were not properly managed and handled as the nurses were not much equipped with knowledge. Hence structured teaching programme was effective strategy to add in the identification and management of psychiatric emergencies.

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