Evaluation of Nurses' Performance of Family Health Nursing Practices at the Primary Health Care Centers in Al-Muthana Health Directorate

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Abstract- **Objective(s):** To evaluate nurses' performance of family health nursing practices at the primary health care centers in Al-Muthana Health Directorate and to determine the relationships between these nurses' performance and their demographic characteristics of age, gender, years of employment and training.

Methodology: A descriptive design using the evaluation approach is carried throughout the present study from the period of March 25th 2015 through June 30th 2016. A purposive sample, of (26) Diploma nurses, is selected through the use of non-probability sampling approach. The sample of study includes nursing staffs who are working at primary health care centers in Al-Muthanna Health Directorate in Al- Muthanna Governorate. Through an intensive review of relevant literature, an observational tool is constructed as a mean of data collection. Content validity of the study observational tool is determined through the use of panel of (11) expert. Inter-observer reliability is computed for the determination of the equivalence of the study observational tool. Data are collected through the application of the study instrument and the structured observation technique as means of data collection. Data are analyzed through the application of descriptive statistical data analysis approach (i.e., frequency, percent, total scores and cumulative percent) and inferential statistical data analysis approach (i.e., Pearson correlation coefficient and multiple regressions).

Results: The study results depict that the majority of nurses' responses to the studied items are inadequate which is accounted for (92.3%) of the whole responses. Staff nurses' years of employment is found to have highly significant impact upon their performance at p-value less than 0.01. In addition, the study results indicate that staff nurses' age has significant impact upon their performance of family health nursing at p-value less than 0.05, while the remaining characteristics of staff nurses' gender and training have no impact upon their performance at p-value more than 0.05.

Recommendations: The study recommends that Family Health Nursing Program Based Education Program should be designed and implemented to staff nurses in order to improve their performance of practices in the area of family health services. Further studies can be conducted on these nurses to determine the effectiveness of the Family Health Nursing Education Program on their performance of such practices.

I. INTRODUCTION

The Family Health Nurse (FHN) concept is introduced by the World Health Organization Europe as a possible means of developing and strengthening family and community oriented health services (1). Within the Health-21 health policy framework it was proposed that this new type of nurse would make "a key contribution within a multidisciplinary team of health care professionals to the attainment of the 21 health targets set in the policy." The full definition of the new role states that "The Family Health Nurse will: help individuals and families to cope with illness and chronic disability, or during times of stress, by spending a large part of their time working in patients' homes and with their families. Such nurses give advice on lifestyle and behavioral risk factors, as well as assisting families with matters concerning health. Through prompt detection they can ensure that the health problems of families are treated at an early stage. With their knowledge of public health and social issues and other social agencies, they can identify the effects of socio-economic factors on a family's health and refer them to the appropriate agency. They can facilitate the early discharge of people from hospital by providing nursing care at home, and they can act as the lynchpin between the family and the family health physician, substituting for the physician when the identified needs are more relevant to nursing expertise" (1).

Family health nurse can assist family members in identifying actual or potential areas of health risk, establishing health goals based on the family's needs and interests, and developing an effective lifelong plan for health protection. The family health nurse plays a vital role in developing and fostering health protective behaviors within the family. A family-centered approach is particularly important for health protection because many of the diseases or health conditions to be prevented have a genetic basis or are related to lifestyle. It is vital that the entire family address its potential risks and work together to implement protective behaviors (2).

According to (3) the aim of family nursing is "to provide holistic care for individuals and family units". This implies a practice orientated approach where the family is seen as the unit of care (4).(5) define family nursing practice more comprehensively, referring to it as a perspective focusing on family strengths that is health orientated, holistic, systemic and interactional. The primary goal of family nursing is viewed by some as the promotion of the health of the family as a whole and of each of its members (6) (7). Much of family nursing is

associated with theoretical developments in the US and Canada (8). (9) Refer to these developments as the nursing of families, the implication being that 'family nursing' became the adopted descriptive, interchangeable label in North America. Recent years have seen international advances in practice and research in this field of nursing (7).

Based on the early stated facts, the present study ought to evaluate nurses' performance of family health nursing practices and determine the relationships between such performance and their demographic characteristics of age, gender, years of employment and training.

II. METHODOLOGY

Descriptive design using the evaluation approach is carried throughout the present study from the period of March 25th 2015 through June 30th 2016.

A purposive sample, of (26) Diploma nurses, is selected throughout the use of non-probability sampling approach. The sample of study includes nursing staffs who are working at primary health care centers in Al Muthanna Health Directorate in Al Muthanna Governorate.

An observational tool is designed through the use of (3) levels type Likert Scale for the evaluation of nurses' performance relative to family health nursing at the primary health care centers. The rating and scoring system of the scale is consisted of (3) for adequate performance, (2) for acceptable performance, and (1) for inadequate performance. Adequate performance is considered when (3) correct episodes of performance are observed; acceptable performance is considered when only (2) episode of performance is done; and inadequate performance is considered when there is (1) episode of performance is observed. Total scores for nurses' performance of (131- 217.3) is considered inadequate; (217.4-304.6) is considered fair; (304.7-393) is considered adequate.

The observational tool is comprised of (16) statements that deal the major domains of the family health nursing education program. The first statement is measured through (20) items which is dealing with **Family Nursing Roles** , the second statement is measured through (4) items which is dealing with **Family Structure**, the third statement is measured through (6) items which is dealing with **Family Function** , the fourth statement is measured through (3) items which is dealing with **Family Development**, the fifth statement is measured through(3) items which is dealing with **Family Coping**, the sixth statement is measured through (3) items which is dealing with **Family Assessment**, the seventh statement is measured through (41) items which is dealing with **Assessing Family Dimensions of Health**, the eighth statement is measured through (5) items which is dealing with **Family planning** , the ninth statement is measured through (8) items which is dealing with **Family Interventions**, the tenth statement is measured through (4) items which is dealing with **Family Evaluation**, the eleventh statement is measured through (10) items which is dealing with **Family as A Caregiver**, the twelfth statement is measured through (4) items **Family at risk or with health problem** which is dealing with **Family as A Caregiver**, the thirteenth statement is measured through (6) items which is dealing with **family health promotion**, the fourteenth statement is measured through (3) items which is dealing with **Impact of culture and society upon family health**, the fifteenth statement is measured through (7) items which is dealing with **Social influences on health and well-being**, and the sixteenth statement is measured through (7) items which is dealing with **Ethical issues related to care of family**. It comprised of (131) items which are concerned with the domains of the performance of family health nursing at the primary health care centers.

Content validity of the study observational tool is determined through the use of panel of (11) expert. Inter-observer reliability is computed for the determination of the equivalence of the study observational tool. Pearson correlation coefficient is computed for such reliability and (r=0.78) which is considered satisfactory.

Data are collected through the application of the study instrument and the structured observation technique as means of data collection. Data are analyzed through the application of descriptive statistical data analysis approach (i.e., frequency, percent, total score and cumulative percent) and inferential statistical data analysis approach (Pearson correlation coefficient and multiple regressions).

III. RESULTS

Table (1) Overall Evaluation of Nurses' Performance of Family Health Nursing Practices

Overall Evaluation of Nurses' Performance	Frequency	Percent	Cumulative Percent
Fair 217.4-304.6	**2**	**7.7**	**7.7**

Inadequate 131-217.3	24	92.3	100

This table shows that the majority of nurses' responses to the studied items are inadequate which is accounted for (92.3%) of the whole responses.

Table (2) Multiple Regression for the Relationship between Nurses' Performance and Their Demographic Characteristics

Demographic Characteristics	R^2	Sig.
Age/ Years	0.446	0.022 S
Gender	0.289	0.153 NS
Years of Employment	0.533	0.005 HS
Training Session	0.315	0.117 NS

Df= Degree of freedom, F=F-statistics, R^2=Regression coefficient, Sig.= level of significance, S=Significant, NS=Not significant, HS=Highly Significant.

This table presents that staff nurses' years of employment is found to have highly significant impact upon their performance at p-value less than 0.01. In addition, the study results indicate that staff nurses' age has significant impact upon their performance of family health nursing at p-value less than 0.05, while the remaining characteristics of staff nurses' gender and training have no impact upon their performance at p-value more than 0.05.

IV. DISCUSSION

Part I: Discussion of Overall Evaluation of Staff Nurses' Performance of Family Health Nursing

Evaluation of such performance has indicted that nurses' performance for the majority of the group is inadequate (92.3%) (Table 1). This finding has emerged due to the fact that nurses' performance presents deficiencies relative to most items in the observational scale. So, these nurses require any sort of family health nursing based education program. Such program may create improvement to their performance of such practices.

The key elements of the role of the family health nurse should be outlined in the policy document, which stresses that they need to be educated and trained in such a way as to ensure that they acquire the necessary underpinning knowledge and skills (10).

Part II: Discussion of the Relationships between Staff Nurses' Performance of Family Health Nursing and Their Demographic Characteristics

Analysis of the relationships between nurses' performance of family health nursing practices and their demographic characteristics through has revealed that staff nurses' age has significantly affect their performance and years of employment has highly influenced their performance (Table 2). These findings support the fact that staff nurses with different age groups and different years of employment may definitely perform practices of family health nursing. So, we can confirm that the younger the age of the staff nurses the better their performance and the lower the years of employment the more adequate their performance is being.

Age as predictor of nurses' performance has been explored in a descriptive study. Data which are gathered from (222) nurses undertaking 'the pre-registration diploma in nursing' program at a university in the North West of England are analyzed. The study finds that nurses' age is significantly predicted performance. The young nurses (aged < 20 years) are identified in the study as being at risk in terms of their performance whilst the oldest nurses (aged > 34 years) are found to predict better overall performance (11).

The impact of nurses' employment status upon their work-related performance is examined in a descriptive study which is designed to investigate the employment status of contract versus

full-time nurses at a public hospital. Samples are recruited from a public hospital in Taiwan. The investigation is carried throughout the use of a regression model that includes the variables underlying the study. The findings indicate that performance levels for full-time nurses are significantly higher than those of contract nurses (12).

V. RECOMMENDATIONS

1. Family Health Nursing Program Based Education Program should be designed and implemented to staff nurses in order to improve their performance of practices in the area of family health services.

2. Nurses, who are performing family health nursing in the primary health care centers, should be presented with greater opportunities of being involved in courses of continuing education and training to increase their capacity of learning up-to-date knowledge and acquiring new skills.

3. Further studies can be conducted on these nurses to determine the effectiveness of the Family Health Nursing Education Program on their   performance of such practices.

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