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NURSE'S SAFETY ATTITUDES AS PERCEIVED BY GERIATRIC PATIENTS IN HOMECARE INSTITUTIONS

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Abstract

The corona virus pandemic this year has given everyone bizarre health situations and an incommensurate danger, especially to the geriatric patients' health, living conditions, interrelationships and overall well-being (Adhikari et al., 2020). No one knows how long this will last or when it will stop; its spread has affected many lives especially geriatric patients living in homecare institutions. The purpose of this study is to determine the nurse's safety attitudes in times of pandemic as perceived by the geriatric patients in home care institutions. Data were gathered using an adapted and modified questionnaire entitled, "Nursing Home Survey on Patient Safety" from the research study of Alvin C. Ogaesco and Janet B. Lim of the University of Texas, for whom the authors were asked permission for its use. The research results showed: that most of the geriatric patients were 60 to 69 years old, female, married, and stayed for 0 to 9 years in the homecare institution; a very much evident nurse's safety attitudes was noted as perceived by the geriatric patients in terms of cognitive, affective and psychomotor aspects; and that there were significant differences between the nurse's safety attitudes when the respondents were grouped according to their gender, civil status and length of stay in the institution. It was recommended that: geriatric patients should view old age as an opportunity for continuous development, satisfaction, and well-being; and that nurses must always carry with them their best safety attitudes while taking care of them, keeping in mind all these characteristics especially on critical times like the pandemic; they must also become more sensitive to the needs of the geriatric patients, focusing on counseling them to become aware of the necessary steps to avoid infection during the pandemic; accept their limitations and mental health management.

Keywords

Safety Attitudes, Nurse's Safety Attitudes, Geriatric Patients in Homecare Institutions, Pandemic Safety Attitudes of Nurses

1. Introduction

This year's coronavirus pandemic has given everyone bizarre health situations and an incommensurate danger, especially to the geriatric patients' health, living conditions, interrelationships, and overall well-being (Adhikari et al., 2020). No one knows how long this will

last or when it will stop; its spread has affected many lives especially geriatric patients living in homecare institutions.

According to United Nations (2020), the shortage of knowledge compelled everyone to contradict the effects of the coronavirus pandemic which can affect mostly those geriatric patients inside homecare institutions. It can be noted that geriatric patients in homecare institutions have a higher probability of becoming infected with the coronavirus. This is due to their frailty in association with aging, that they cannot perform well in their daily routine activities. Because geriatric patients have coexistence of several chronic diseases, Boltz (2011) suggested that they need more multifaceted care. According to World Health Organization (WHO, 2013), an interdisciplinary team's approach with the collaboration of all sectors which includes nurses is needed for the prevention and control of health problems of older persons. Through cooperative effort, geriatric patients can live normally and experience the utmost care possible.

Caring for older persons takes into consideration the normal aging process or age-related changes in every individual that begins when they were born and continues as they go on with their life. It includes the process of spontaneous changes (physical, emotional, psychological, social, and economic aspects) that occur as part of human life development. It presents a very distinct kind of challenge for everybody (Shrivastava et al., 2013); such that factors such as lifestyle, personality, and environment play a major role in its process, and not only genetics as its prime determinants.

Here in the Philippines, the Filipino older persons, according to the National Statistical Coordination Board of the Philippines, is comprised of 6.9 percent of the total population; and by the year 2040, out of 141.7 million Filipinos, they will be approximately 19.6 million. According to Viola (2011), older persons and their average age has been steadily increasing over time. This means more geriatric patients will be needing quality care from their families as well as from their health care providers like the nurses. This is due to the fact that as people age, their life can be affected by changes physically, psychologically, socially, and environmentally (Beliran and Legaspi, 2014). In the study made by Chang et al in 2012, they reported that there is a weakening of both physical and mental functions for geriatric patients because of the aging process, which makes them vulnerable, less effort in performing tasks, and increase the rate of becoming disable and even death may occur.

According to the works of Nayeri et al (2015) geriatric patients are susceptible to all kinds of complications (incontinence, motor disability, fall, motor disability, pressure ulcers, and poor nutrition); that can happen at the same time with other health-related conditions like having chronic

illnesses that can be mild to severe (Rush et al, 2017). According to the same authors, this is why they need help from their significant others or their healthcare providers. These findings were intensified by studies from different authors that showed that based on empirical observations, geriatric patients inside homecare institutions because of different clinical factors can receive the variable quality of care (Kinley and Hockley, 2010); almost 50 percent of them do not have provision for the management of chronic diseases (like rehabilitation or physiotherapy) (Challis et al., 2000); as a result, there will be poor pain symptom control (Miller et al., 2004), and some can have inappropriate medication (Kinley and Hockley, 2010). With all these conditions happening to geriatric patients inside homecare institutions, it is, therefore, noted that protecting/caring for geriatric patients is important to ensure that necessary support or help will be given to them throughout the period of the pandemic.

Health care providers such as nurses and their safety attitudes towards care for the geriatric patients should be geared towards becoming mindful that geriatric patients are helpless as a result of being isolated socially, having hard-time to earn money, and being anxious about the coronavirus pandemic and its consequences (Makaroun et al., 2020). This is because nurses are the front-line caregivers, their regular, systematic observation of the geriatric patients' status gives the opportunity to recognize problems at hand.

2. Research Objectives and Scope of the Study

This study was conducted to explore and determine how evident are the safety attitudes of nurses as perceived by the 245 geriatric patients in selected homecare institutions in Metro Manila Philippines, especially now there is Covid 19 pandemic, and to know if there are significant differences between these evident safety attitudes of nurses when the respondents are grouped according to their profile.

The result of this study became the basis for the development of a guideline for a holistic approach or enhanced quality management for geriatric patients for selected home care institutions in Metro Manila.

3. Methodology

This cross-sectional study utilized the descriptive type of research specifically the descriptive-correlational design to determine the nurse's safety attitudes as perceived by 245 geriatric patients living in selected homecare institutions within Metro Manila, Philippines. This research design was used because, in Nursing, most studies are non-experimental because a vast number of human characteristics inherently cannot be experimentally manipulated. In addition, many variables that could technically be manipulated cannot be manipulated ethnically. The age range of the participants was 60 to 80 years old. Data were gathered using email/Facebook video messenger in distributing the adapted and modified questionnaire entitled, "Nursing Home Survey on Patient Safety" from the research study of Alvin C. Ogalesco and Janet B. Lim of the University of Texas, whom the authors were asked permission for its use. Any possible questions were also addressed, and informed consent forms were handed out. A sociodemographic questionnaire was used to collect personal data about age, gender, civil status, and length of stay in the homecare institutions. The self-administered questionnaire is anonymous and has direct questions. It consists of items about nurse's safety attitudes. The results were analyzed using Statistical Package for the Social Sciences (SPSS), a program for statistical analysis. The quantitative data are described as frequency (n) and percentages (%). Weighted means were also used. Different variables were related using the t-test for comparing means of two variables and an analysis of variance for comparing means of more than two variables. Values were considered significant if their confidence level was 95% ($p=0.05$).

4. Results

This section contains the results, analysis, and discussion of the study.

Problem 1: What is the demographic profile of the geriatric patient-respondents?

Table 1: Demographic Profile of the Geriatric Patient-Respondents

	Profile	Frequency	Percentage
AGE	60-69 years old	108	44%
	70-79 years old	88	36%
	80 years old and above	49	20%
	Total	245	100.0%
GENDER	Male	98	40 %
	Female	147	60%
	Total	245	100.0%
CIVIL STATUS	Married	127	52%

	Single	10	4%
	Separated	88	8%
	Widow	20	36%
	Total	245	100.0%
LENGTH OF STAY IN THE HOME CARE INSTITUTION	0-9 years	137	56%
	10-19 years	98	40%
	20 years and above	10	4%
	Total	245	100.0%

Table 1 shows the demographic profile of the geriatric patient-respondents. In terms of age, the highest belongs to ages 60 – 69 years old with 44 percent or 108 out of 245; the lowest is those belonging to more than 80 years old and above with only 20 percent or 49 out of 245. This suggests that the respondents were mostly on their young older personage. That is, they are more able to understand how their nurses care for them and how they provide safety in time of pandemic; In terms of gender, 60 percent comprises the female population, while 40 percent comprises the male population. This finding indicated that females dominate the population of the geriatric patient-respondents of this study; In terms of civil status, most of the geriatric patient-respondents are married with 52 percent or 127 out of 245. The lowest was the single ones with only 4 percent or 10 out of 245; In terms of length of stay in the institution, most of the geriatric patient-respondents have been there for 0 – 9 years or 56 percent; others were living there for 10 – 19 years with 40 percent, and lastly, 10 or 4 percent of the respondents have been there for 20 years and more. This means that the geriatric patients were being home cared in institutions for years and have been familiar with the routines of their life there.

Problem 2: What is the Nurse’s Safety Attitude in the Institutional Home Care Setting as Perceived by the Geriatric Patients?

2.1. Cognitive Aspect

Table 2: *Nurse’s Safety Attitude in terms of Cognitive Aspect*

Items	Weighted Mean	Rank	Interpretation
As a healthcare provider, my nurse...			
1. Understand her responsibility in this institution.	3.68	1	Very Much Evident
2. Know that he/ she needs to collaborate with his/ her colleagues to keep patients safe from harm.	3.52	3	Very Much Evident
3. Know the standard procedures when caring for the Elderly.	3.40	4	Very Much Evident
4. Think shortcuts can make her work faster.	3.28	6	Very Much Evident
5. Know that feedback on her performance are	3.32	5	Much Evident

important.			
6. Know that they need to prioritize patient safety in is institution.	3.56	2	Very Much Evident
Over-all mean score	3.46		Very Much Evident

LEGEND:

- 3.25 - 4.00 - Very Much Evident
- 2.50 - 3.24 - Much Evident
- 1.75 - 2.49 - Less Evident
- 1.00 - 1.74 - Very Less Evident

Table 2 shows the nurse’s safety attitude in the institutional home care setting as perceived by the geriatric patients in terms of cognitive aspect, with an overall mean score of 3.46 interpreted as very much evident. This indicated that the goals to preserve the cognitive functional capacity of geriatric patients have been greatly met evidently. With this kind of safety attitude by the nurses, the geriatric patients will not be burdened so much by cognitive limitations that limit their ability to hear, see, and/or understand their medical circumstances. This will help in their improved function, independence, and quality of life. When this happens, the geriatric patients feel safe and they can easily communicate how they feel, what they want, and what they prefer for their treatment regimen while inside homecare institutions. This finding is supported by the works of Bell et al (2016) which reported that patient-centered goals of care for geriatric patients are critical to the personalized treatment approach for each patient. The authors added that geriatric patients do not necessarily desire longevity as their sole outcome but may also have expectations about modifying pain, independent life, or increasing function. This finding is also supported by the works of Gastmans (2006) which reported that care is a given practice between the nurse and the patient, which made it a form of relationship between them.

2.2. Affective Aspect

Table 3: Nurse’s Safety Attitude in terms of Affective Aspect

Items	Weighted Mean	Rank	Interpretation
As a healthcare provider, my nurse...			
1. Like her job.	3.52	2.5	Very much evident
2. Empathize with the patient’s feelings and concerns.	3.52	2.5	Very much evident
3. Is not afraid to report their mistakes.	3.32	4.5	Much evident

4. Feel bothered when they ignore procedures to make work easier.	3.32	4.5	Very much evident
5. Enjoy discussing ways with the health care team on how to keep patients from harm.	3.56	1	Very much evident
Over-all Mean Score	3.45		Very Much Evident

Table 3 illustrates the nurse’s safety attitude in the institutional home care setting as perceived by the geriatric patients in terms of affective aspect, with an overall mean score of 3.45 interpreted as very much evident. This suggests that the goals to preserve behavioral/affective capacity (affective reactions, beliefs and knowledge, and specific behavioral responses) of the geriatric patients have been greatly met evidently. This kind of safety attitude by the nurses means that they understand how the social environment affects the behavior of the geriatric patients; that any change in the social environment (like what is happening now while there are safety issues outside the homecare institutions due to Covid-19 pandemic), the well-being of the geriatric patients will be affected and it is both a challenge and an opportunity for the patients. Challenge because they have to make sure that they are always safe especially from infection (wash their hands often, use alcohol to sanitize, wear face masks and face shields); and opportunity since they have the freedom to stay safe always and make sure that their surroundings are clean and the people they converse with are also safe. According to Gramm et al (2012), the environment of older people affects their physical performance. Those geriatric patients with low ability to perform like walking or roaming around the place (Portegijs et al., 2017) can be helped and their health can be significantly upgraded by appropriate alterations of their environment to meet their needs (Elo et al, 2011 and Sakari et al, 2017).

2.3.Psychomotor Aspect

Table 4: Nurse’s Safety Attitude in Terms of Psychomotor Aspect

Items	Weighted Mean	Rank	Interpretation
As a healthcare provider, my nurse...			
1. Adhere to clinical guidelines and evidence-based criteria in this office.	3.32	6	Very much evident
2. Provide the patient adequate and functional equipment.	3.36	5	Very much evident
3. Explain safety precautions in doing an activity / exercises.	3.44	4	Very much evident
4. Make sure that all rooms, hallways, and stairways are clean and adequately lit.	3.44	4	Very much evident
5. Stays and comfort the patient when they feel anxious or depressed.	3.44	4	Very much evident

6. Provide clean and adequate food and fluid at the right time.	3.64	1	Very much evident
7. Maintain patient’s environment safe, clean and neat.	3.56	2	Very much evident
Over-all Mean Score	3.46		Very Much Evident

Table 4 presents the nurse’s safety attitude in the institutional home care setting as perceived by the geriatric patients in terms of psychomotor aspect, with an overall mean score of 3.43 interpreted as very much evident. This suggests that the goals to preserve the psychomotor capacity of geriatric patients have been greatly met evidently. This kind of safety attitude by the nurses means that they are aware of the essence of the psychomotor functions and the ability to move physically of the geriatric patients; that they knew that these are all important factors that influence the performance of daily routine activities of these older persons. This is because the movement of a person slows with age. This limits their functioning to care for themselves. Since nurses have evident safety attitudes of taking into consideration these limitations in movements of the geriatric patients, they make sure that all the daily routine activities are done/met; if not, they support and help the geriatric patients in the performance of their tasks.

According to www.rnpedia.com older people usually have a reduction in their mental capacities such as to think or remember, that is why they lack some of their motor skills. This is the main reason why an older person cannot perform well their basic daily living activities. Therefore, it is imperative that healthcare providers especially nurses need to be skilled in caring for them in such a way that the older person can be helped in their performance of basic routine activities.

Another support for the finding above is the works of Smith (2006) which said that it is important to match the capability of nurses to their patients as to knowledge and skills in caring for older persons. This will ensure that their care will be directed appropriately to the older person patients and will not cost enormously (Boltz et al, 2008).

Problem 3: Is there a Significant Difference Between the Nurse’s Safety Attitude when the Respondents are Grouped according to their Profile?

3.1. Age

Table 5: Nurse’s Safety Attitude When Grouped According to Age

Source of Variation	Age	Computed F	p-value	Decision	Interpretation
	0-69 years old	4.21	0.072	Accept Ho	

Nurse's Safety Attitude	0-79 years old				No Significant Difference
	80 years old and above				

Table 5 illustrates the nurse's safety attitude in the institutional home care setting when grouped according to age. It shows that there are no significant differences between the nurse's safety attitude and their level of care when grouped according to age as determined by the p-value Of 0.072. This indicates that the geriatric patients see it that regardless of age, they look/perceive that their nurses perform the same safety attitude to them. This can be attributed to the art of nursing and compassionate care which allows the nurse to be at her best while making their patient feel that they are respected and being cared for. Therefore even when the geriatric patients are young old, middle old, or old-old person, their support from the nurses were still the same. This is supported by the theory of Leininger (2007) which stated the essence of nursing is to care. In addition as support for the finding is the work. of Schoenhofer (2002) which stated that when a nurse meets the patient, caring takes place. This contact will start the get-to-know process or the "epistemology" of how nurses care.

3.2. Gender

Table 6: Nurse's Safety Attitude When Grouped According to Gender

Source of Variation	Gender	Mean	Levene's Test for Equality of Variances		test for Equality of Means		Decision	Interpretation
			f	sig	t	Sig. (2-tailed)		
Nurse's Safety Attitude	Male	3.00	Equal variances assumed	2.9	.09	2.180	.034	Reject Ho Significant Difference
	Female	2.75	Equal variances not assumed			.888	.074	

Table 6 shows the nurse's safety attitude in the institutional home care setting when grouped according to gender. The table data present that there is a significant difference between the nurse's safety attitude when grouped according to the gender of the geriatric patients as determined by the p-value: 0.034 which less than 0.05. This difference in the safety attitude of nurses based on the gender of the geriatric patients (femininity or masculinity) comes from the fact that the nursing profession is considered to be naturally a female job. Those male geriatric patients may feel uncomfortable being handled by female nurses and sometimes opted to just do it themselves because they feel embarrassed or ashamed. While on the other hand, those female geriatric patients, they seem to love the care and

safety attitudes of their nurses since they feel they are being pampered especially when their nurses are female. They value the care, especially they are both female and can understand each other better. This is attested by the research made by Zhand and Liu (2016) which reported that gender labeling does exist in nursing; wherein touching as a means of care and nurturing is considered a natural job of women nurses.

3.3. Civil Status

Table 7: *Nurse’s Safety Attitude When Grouped According to Civil Status*

Source of Variation	Civil Status	Computed F	p-value	Decision	Interpretation
Nurse’s Safety Attitude	Married	49.56	0.002	Reject Ho	Significant Difference
	Single				
	Separated				
	Widow				

Table 7 presents the significant difference between nurse’s safety attitudes in the institutional home care setting when grouped according to the civil status of the geriatric patients as determined by the p-value of 0.002 which is lesser than 0.05. This finding means that being married and not married to the geriatric patients made them feel different as to how the safety attitudes of their nurses were being performed to them. Those married patients have their spouses to care for them besides their nurses; while the single ones do not have spouses to care for them. This is why the single ones are more in need of the care/safety attitudes of nurses than those who are married. According to Espinosa and Evans (2008) in their work, it was reported that there is a protective role of a strong social relationship resulting in better health because spouses (especially women) function as caregivers, offering support physically and emotionally. In addition, this finding is in contrast with the work of Moradi et al (2014) which revealed a no significant relationship between caring as part of their quality of working life (QWL) of nurses and their patient’s marital status;

3.4. Length of Stay in the Home Care Institution

Table 8: *Nurse’s Safety Attitude When Grouped According to Length of Stay in the Home Care Institution*

Source of Variation	Civil Status	Computed F	p-value	Decision	Interpretation
Nurse’s Safety Attitude	0-9 years	14.74	0.005	Reject Ho	Significant Difference
	10-19 years				

	20 years and above				
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Table 8 shows the significant difference between nurse’s safety attitudes in the institutional home care setting when grouped according to the length of stay in the homecare institution as determined by the p-value of 0.005. This finding means that the nurses vary in their ways on how to safely adjust and care for their geriatric patients, and it varies according to the time the geriatric patients spent in the homecare institution. Those geriatric patients who lived in the homecare institutions for long have a great deal of experience (safely caring like friends for some time) while working with their nurses, while those who had only a few years are still in the adjustments phase with their nurses. This finding is similar to that of Coban, Kurca, and Yurtas (2015) which observed that nurses with a longer service period are more positive about their profession than those with a shorter service period. This is the same as that of the patients. The longer the nurses have work in the institution, can be observed by those patients who have been there also for so long too. The authors Coban et al (2015) emphasized that there is a direct relation between nurses’ age and service period, and it is thought that the improvement in this attribute is due to the length of service.

5. Conclusion

It was concluded that there is a very much evident nurse’s safety attitude as perceived by the geriatric patients in terms of cognitive, affective, and psychomotor aspects; and that there were significant differences between the nurse’s safety attitudes when the geriatric patients are grouped according to their gender, civil status, and length of stay in the institution. This implies a variety of safety attitudes being perceived by geriatric patients as they differ in gender, civil status, and length of stay in the homecare institutions. Now that it's pandemic, these safety attitudes of nurses are very much important to protect geriatric patients while staying in any homecare institutions. This study paved a way for the creation of baseline data needed to enable health authorities to prioritize training programs that can support nurses taking care of geriatric patients during the COVID-19 pandemic.

6. Research Limitations

This study was limited only to geriatric patients being cared for by nurses working in selected homecare institutions in Metro Manila. Future research involving other nurses from other homecare

institutions from other locales is needed to establish more evidence about the nurse's safety attitudes in caring for geriatric patients in times of pandemics.

7. Recommendation

It was recommended that: geriatric patients should view old age as an opportunity for continuous development, satisfaction, and well-being; and that nurses must always carry with them their best safety attitudes while taking care of them, keeping in mind all these characteristics especially on critical times like the pandemic; nurses to become more sensitive to the needs of the geriatric patients, focusing on counseling them to become aware of the necessary steps to avoid infection during the pandemic; accept their limitations and mental health management; family and relatives of geriatric patients to think that aging is a natural experience and must confidently learn how to care and cope with their geriatric patients especially during a pandemic; nursing education to emphasize on the teaching of student nurses on how to manage giving care to geriatric patients inside homecare institutions in order to promote good and effective health interventions during a pandemic.

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