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RESEARCH ARTICLE

EFFECTIVENESS OF AGGRESSION MANAGEMENT PROGRAMME (AMP) ON THE SKILLS OF REGISTERED STAFF NURSES IN A SELECTED SETTING WITH A VIEW TO PREPARE AN AGGRESSION MANAGEMENT CLINICAL PATHWAY

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ABSTRACT

Anger need not be a negative expression. Anger is a normal human emotion that, when handled appropriately and expressed assertively can provide an individual with a positive force to solve problems and make decisions concerning life situations. Anger becomes a problem when it is not expressed and when it is expressed aggressively. The aim of the study is to learn to control anger by recognizing what triggers their anger, how behaviour contributes to a volatile situation. The number of and impact of violent incidents in mental healthcare settings can be reduced by the appropriate, therapeutic and effective use of the full range of interventions. This can only occur if adequate number of professionals are properly trained in the different techniques and organizations have robust systems for auditing and monitoring the prevention and management of violence.

INTRODUCTION

Aggression exposure is highly prevalent in healthcare workers, and is a complex problem that negatively impacts patient, worker safety and health. Typically only events of high severity (e.g., use of physical restraint or incident reports) are Monitored in healthcare settings. Unfortunately, these events are likely a small fraction of all aggressive events that range from verbal to physical. Improved measurement and monitoring of healthcare worker aggression exposure may lead to improved patient and worker safety and health. Aggression in healthcare settings is a complex problem that affects patient outcomes and worker health and requires careful consideration of measurement, monitoring, and intervention. Health care workplace aggression exposure is common; more than half of workers report past year exposure Nurses have the highest rates of aggression exposure of all clinical workers, possibly due to the type and amount of patient contact Patients are the primary perpetrators of aggression toward nurses and other providers, although family and visitors may also behave aggressively of these acts, it is difficult to obtain accurate estimates of both patient aggression and rates of health care worker aggression exposure.

Objectives

- To assess the skills of registered staff nurses before introduction of Aggressive Management Programme

- To assess the skills of registered staff nurse after the introduction of Aggression Management Programme
- To assess the differential level o skills before and after introduction of Aggression Management Programme
- To find out the association between before programme skills and the baseline data of the staff nurses

MATERIALS AND METHODS

An evaluatory approach with one group pre-test design was adopted for this study. A pre-experimental research (one group pre-test post-test design) was used for the present study. The sample consisting of 25 registered staff nurses of Psychiatric Ward, Father Muller Medical College Hospital were selected by convenient sampling technique, tools used were baseline proforma, observational checklist for the 4 case scenarios where simulation was performed. The data was analyzed using 't' test and chi-square.

RESULTS

The collected data was analyzed using description and inferential statistics:

The data showed that:

- The skills of registered staff nurses before introduction of Aggression Management Programme

The grading of the skill score range

- Excellent 90%
- Good 71-90%
- Satisfactory 51-70%
- Poor Below 70%

- In case 1 – 64% was (satisfactory) and 34% was poor
- In case 2 – 84% was (satisfactory) and 16% was poor
- In case 3 – 12% was (satisfactory) and 88% was poor
- In case 4 – 28% was (satisfactory) and 72% was poor

The skills of registered staff nurses after the introduction of AMP

- Case I – Excellent – 4%
- Good – 60%
- Satisfactory – 36%
- Case II- Good – 88%
- Satisfactory – 12%
- Case III - (Good) 92%, (Satisfactory) 8%
- Case IV- (Good) 80%, (Satisfactory) 20%

The 5 domains, difference in level of skills before and after introduction of AMP

- 1st -Prevent the anger to rise
- 2nd -Identify the anger level and
- 3rd-Listening
- 4th -Prevent self injury
- 5th-Make the patient calm

Case I scenario the area 1 (8%) of improvement in AM skill. In area 2 there was (27%) of improvement. In area 3 (17%) of improvement, in area 4 (12%) of improvement, in area 5 there was 38% of improvement in the Aggression Management skill. Association between before programme skills and the baseline data of the staff nurse. The chi-square value is greater than 0.05, so there was no association between before programme skills and the baseline data of the staff.

Interpretation

The finding of the study showed that after the AMP the skills of the registered staff nurses improved.

Conclusion

Aggressive Behaviour sometimes occurs with no warning. But observation and timely intervention will however improve safely for those cases that can be prevented. The key is good training for all staff members who works in the facility.

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